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# (54) MORPHOGEN-INDUCED MODULATION OF INFLAMMATORY RESPONSE

Morphogen-induzierte Modulation von entzündlichen Antworten MODULATION, INDUITE PAR MORPHOGENE, DE REACTION INFLAMMATOIRE

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# Remarks:

The file contains technical information submitted after the application was filed and not included in this specification

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## Description

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#### Field of the Invention

[0001] The present invention relates generally to a method for modulating the inflammatory response induced in a mammal following tissue injury. More particularly, this invention relates to a method for alleviating immune-cell mediated tissue destruction associated with the inflammatory response.

# **Background of the Invention**

[0002] The body's inflammatory response to tissue injury can cause significant tissue destruction, leading to loss of tissue function. Damage to cells resulting from the effects of inflammatory response e.g., by immune-cell mediated tissue destruction, has been implicated as the cause of reduced tissue function or loss of tissue function in diseases of the joints (e.g., rheumatoid and osteo-arthritis) and of many organs, including the kidney, pancreas, skin, lung and heart. For example, glomular nephritis, diabetes, inflammatory bowel disease, vascular diseases such as atheroclerosis and vasculitis, and skin diseases such as psoriasis and dermatitis are believed to result in large part from unwanted acute inflammatory reaction and fibrosis. A number of these diseases, including arthritis, psoriasis and inflammatory bowel disease are considered to be chronic inflammatory diseases. The damaged tissue also often is replaced by fibrotic tissue, e.g., scar tissue, which further reduces tissue function. Graft and transplanted organ rejection also is believed to be primarily due to the action of the body's immune/inflammatory response system.

[0003] The immune-cell mediated tissue destruction often follows an initial tissue injury or insult. The secondary damage, resulting from the inflammatory response, often is the source of significant tissue damage. Among the factors thought to mediate these damaging effects are those associated with modulating the body's inflammatory response following tissue injury, e.g., cytokines such as interleukin-1 (IL-1) and tumor necrosis factor (TNF), and oxygen-derived free radicals such as superoxide anions. These humoral agents are produced by adhering neutrophilic leukocytes or by endothelial cells and have been identified at ischemic sites upon reperfusion. Moreover, TNF concentrations are increased in humans after myocardial infarction.

[0004] A variety of lung diseases are characterized by airway inflammation, including chronic bronchitis, emphysema, idiopathic pulmonary fibrosis and asthma. Another type of lung-related inflammation disorders are inflammatory diseases characterized by a generalized, wide-spread acute inflammatory response such as adult respiratory distress syndrome. Another dysfunction associated with the inflammatory response is that mounted in response to injury caused by hyperoxia, e.g., prolonged exposure to lethally high concentrations of 0<sub>2</sub> (95-100% 0<sub>2</sub>). Similarly, reduced blood flow to a tissue (and, therefore reduced or lack of oxygen to tissues), as described below, also can induce a primary tissue injury that stimulates the inflammatory response.

[0005] It is well known that damage occurs to cells in mammals which have been deprived of oxygen. In fact, the interruption of blood flow, whether partial (hypoxia) or complete (ischemia) and the ensuing inflammatory responses may be the most important cause of coagulative necrosis or cell death in human disease. The complications of atherosclerosis, for example, are generally the result of ischemic cell injury in the brain, heart, small intestines, kidneys, and lower extremities. Highly differentiated cells, such as the proximal tubular cells of the kidney, cardiac myocytes, and the neurons of the central nervous system, all depend on aerobic respiration to produce ATP, the energy necessary to carry out their specialized functions. When ischemia limits the oxygen supply and ATP is depleted, the affected cells may become irreversibly injured. The ensuing inflammatory responses to this initial injury provide additional insult to the affected tissue. Examples of such hypoxia or ischemia are the partial or total loss of blood supply to the body as a whole, an organ within the body, or a region within an organ, such as occurs in cardiac arrest, pulmonary embolus, renal artery occlusion, coronary occlusion or occlusive stroke.

[0006] The tissue damage associated with ischemia-reperfusion injury is believed to comprise both the initial cell damage induced by the deprivation of oxygen to the cell and its subsequent recirculation, as well as the damage caused by the body's response to this initial damage. It is thought that reperfusion injury may result in dysfunction to the endothelium of the vasculature as well as injury to the surrounding tissue. In idiopathic pulmonary fibrosis, for example, scar tissue accumulates on the lung tissue lining, inhibiting the tissue's elasticity. The tissue damage associated with hyperoxia injury is believed to follow a similar mechanism, where the initial damage is mediated primarily through the presence of toxic oxygen metabolites followed by an inflammatory response to this initial injury.

[0007] Similarly, tissues and organs for transplantation also are subject to the tissue destructive effects associated with the recipient host body's inflammatory response following transplantation. It is currently believed that the initial destructive response is due in large part to reperfusion injury to the transplanted organ after it has been transplanted to the organ recipient.

[0008] Accordingly, the success of organ or tissue transplantation depends greatly on the preservation of the tissue activity (e.g., tissue or organ viability) at the harvest of the organ, during storage of the harvested organ, and at trans-

plantation. To date, preservation of organs such as lungs, pancreas, heart and liver remains a significant stumbling block to the successful transplantation of these organs. U.S. Patent No. 4,952,409 describes a superoxide dismutase-containing liposome to inhibit reperfusion injury. U.S. Patent No. 5,002,965 describes the use of ginkolides, known platelet activating factor antagonists, to inhibit reperfusion injury. Both of these factors are described working primarily by inhibiting the release of and/or inhibiting the damaging effects of free oxygen radicals. A number of patents also have issued on the use of immunosuppressants for inhibiting graft rejection. A representative listing includes U.S. Patent Nos. 5,104,858, 5,008,246 and 5,068,323. A significant problem with many immunosuppressants is their low therapeutic index, requiring the administration of high doses that can have significant toxic side effects.

[0009] Rheumatoid and osteoarthritis are prevalent diseases characterized by chronic inflammation of the synovial membrane lining the afflicted joint. A major consequence of chronic inflammatory joint disease (e.g., rheumatoid arthritis) and degenerative arthritis (e.g., osteoarthritis) is loss of function of those affected joints. This loss of function is due primarily to destruction of the major structural components of the joint, cartilage and bone, and subsequent loss of the proper joint anatomy. As a consequence of chronic disease, joint destruction ensues and can lead to irreversible and permanent damage to the joint and loss of function. Current treatment methods for severe cases of rheumatoid arthritis typically include the removal of the synovial membrane, e.g., synovectomy. Surgical synovectomy has many limitations, including the risk of the surgical procedure itself, and the fact that a surgeon often cannot remove all of the diseased membrane. The diseased tissue remaining typically regenerates, causing the same symptoms which the surgery was meant to alleviate.

[0010] Psoriasis is a chronic, recurrent, scaling skin disease of unknown etiology characterized by chronic inflammation of the skin. Erythematous eruptions, often in papules or plaques, and usually having a white silvery scale, can affect any part of the skin, but most commonly affect the scalp, elbows, knees and lower back. The disease usually occurs in adults, but children may also be affected. Patients with psoriasis have a much greater incidence of arthritis (psoraitic arthritis), and generalized exfoliation and even death can threaten afflicted individuals.

[0011] Current therapeutic regimens include topical or intralesional application of corticosteroids, topical administration of keratolytics, and use of tar and UV light on affected areas. No single therapy is ideal, and it is rare for a patient not to be treated with several alternatives during the relapsing and remitting course of the disease. Whereas systematic treatment can induce prompt resolution of psoriatic lesions, suppression often requires ever-increasing doses, sometimes with toxic side effect, and tapering of therapy may result in rebound phenomena with extensions of lesions, possibly to exfoliation.

[0012] Inflammatory bowel disease (IBD) describes a class of clinical disorders of the gastrointestinal mucosa characterized by chronic inflammation and severe ulceration of the mucosa. The two major diseases in this classification are ulcerative colitis and regional enteritis (Crohn's Disease). Like oral mucositis, the diseases classified as IBD are associated with severe mucosal ulceration (frequently penetrating the wall of the bowel and forming strictures and fistulas), severe mucosal and submucosal inflammation and edema, and fibrosis (e.g., scar tissue formation which interferes with the acid protective function of the gastrointestinal lining.) Other forms of IBD include regional ileitis and proctitis. Clinically, patients with fulminant IBD can be severely ill with massive diarrhea, blood loss, dehydration, weight loss and fever. The prognosis of the disease is not good and frequently requires resection of the diseased tissue.

[0013] The present invention finds application in a method for protecting mammalian tissue, particularly human tissue, from the damage associated with the inflammatory response following a tissue injury. The inflammatory reaction may be in response to an initial tissue injury or insult. The original injury may be chemically, mechanically, biologically or immunologically related. Another application is in methods and compositions for protecting tissue from the tissue destructive effects associated with chronic inflammatory diseases, including arthritis (e.g., reheumatoid or osteoarthritis), psoriatic arthritis, psoriasis and dermatitis, inflammatory bowel disease and other autoimmune diseases. Yet another application is in methods and compositions for enhancing the viability of mammalian tissues and organs to be transplanted, including protecting the transplanted organs from immune cell-mediated tissue destruction, such as the tissue damage associated with ischemia-reperfusion injury. This tissue damage may occur during donor tissue or organ harvesting and transport, as well as following initiation of blood flow after transplantation of the organ or tissue in the recipient host.

[0014] The invention also finds application in a method for alleviating tissue damage associated with ischemic-reperfusion injury in a mammal following a deprivation of oxygen to a tissue in the mammal. Other applications include providing a method for alleviating tissue damage associated with ischemic-reperfusion injury in a human which has suffered from hypoxia or ischemia following cardiac arrest, pulmonary embolus, renal artery occlusion, coronary occlusion or occlusive stroke. A further application is to provide a method for alleviating tissue damage associated with hyperoxia-induced tissue injury, e.g., lethally high oxygen concentrations.

[0015] Still another application of the invention is to provide a method for modulating inflammatory responses in general, particularly those induced in a human following tissue injury.

[0016] These and other objects and features of the invention will be apparent from the description, drawings and claims which follow.

[0017] Each of Kurvilla et al. (1991), 88 Proc. Natl. Acad. Sci. USA 2918-2921, Lefer et al. (1990), 249 Science 61-64; Shepard et. al., EP 0,269,408; Nathan et al., W090/00900; and, Bentz et al., U.S. Pat. 4,971,952 describe studies testing whether TGFβ can mitigate specific types of inflammatory or ischemia reperfusion damage to mammalian cells or tissues. TGF-β is not a member of the class of proteins defined herein as morphogens.

[0018] Each of Oppermann et. al., W091/05802; Kuberasampath et al., W089/09787; Oppermann et al., W089/09788; and Oppermann et al. W092/07073 teach that OP-1 and related proteins may be used in stimulating tissue-specific regeneration of mammalian cartilage and bone tissue. In particular, these references teach that OP-1, when adsorbed on a suitable supporting matrix, induces the developmental cascade of cellular and molecular events that culminates in endochondral bone morphogenesis. The biologically active OP-1 preparations are taught to be, at best, sparingly soluble in physiologically compatible solutions. OP-1-charged matrix devices thus are disclosed as useful for inducing local morphogenesis of bone and/or cartilage.

[0019] Cohen et al., W092/15323 teaches that OP-1 induces tissue specific morphogenesis in diverse mammalian body tissues, and that morphogen can be used in the replacement or repair of damaged tissues.

# 5 Summary of the Invention

[0020] The present invention is defined in the claims. It finds utility in a method for alleviating the tissue destructive effects associated with activation of the inflammatory response following tissue injury. The method comprises the step of providing to the affected tissue a therapeutically effective concentration of a morphogenic protein ("morphogen", as defined herein) upon tissue injury or in anticipation of tissue injury, sufficient to substantially inhibit or reduce the tissue destructive effects of the inflammatory response.

[0021] Also described herein are compositions and therapeutic treatment methods that comprise the step of administering to a mammal a therapeutically effective amount of a morphogenic protein ("morphogen"), as defined herein, upon injury to a tissue, or in anticipation of such injury, for a time and at a concentration sufficient to inhibit the tissue destructive effects associated with the body's inflammatory response, including repairing damaged tissue, and/or inhibiting additional damage thereto.

[0022] Also described herein are compositions and therapeutic treatment methods for protecting tissues and organs from the tissue destructive effects of the inflammatory response which include administering to the mammal, upon injury to a tissue or in anticipation of such injury, a compound that stimulates in vivo a therapeutically effective concentration of an endogenous morphogen within the body of the mammal sufficient to protect the tissue from the tissue destructive effects associated with the inflammatory response, including repairing damaged tissue and/or inhibiting additional damage thereto. These compounds are referred to herein as morphogen-stimulating agents, and are understood to include substances which, when administered to a mammal, act on cells of tissue(s) or organ(s) that normally are responsible for, or capable of, producing a morphogen and/or secreting a morphogen, and which cause the endogenous level of the morphogen to be altered. The agent may act, for example, by stimulating expression and/or secretion of an endogenous morphogen.

[0023] As embodied herein, the term "ischemic-reperfusion injury" refers to the initial damage associated with oxygen deprivation of a cell and the subsequent damage associated with the inflammatory response when the cell is resupplied with oxygen. As embodied herein, the term "hyperoxia-induced injury" refers to the tissue damage associated with prolonged exposure to lethally high doses of oxygen, e.g., greater than 95% 0<sub>2</sub>, including the tissue damage associated with the inflammatory response to the toxically high oxygen dose. Accordingly, as used herein, "toxic oxygen concentrations" refers to the tissue damage associated withthe injury induced by both lethally low oxygen concentrations of oxygen (including a complete lack of oxygen), and by lethally high oxygen concentrations. The expression "alleviating" means the protection from, reduction of and/or elimination of undesired tissue destruction, particularly immune cell-mediated tissue destruction. The tissue destruction may be in response to an initial tissue injury, which may be mechanical, chemical or immunological in origin. The expression "enhance the viability of" living tissues or organs, as used herein, means protection from, reduction of and/or elimination of reduced or lost tissue or organ function as a result of tissue death, particularly immune cell-mediated tissue death. "Transplanted" living tissue encompasses both tissue transplants (e.g., as in the case of bone marrow transplants) and tissue grafts. Finally, a "free oxygen radical inhibiting agent" means a molecule capable of inhibiting the release of and/or inhibiting tissue damaging effects of free oxygen radicals.

[0024] Described herein are methods and compositions for alleviating the ischemic-reperfusion injury in mammalian tissue resulting from a deprivation of, and subsequent reperfusion of, oxygen to the tissue. Also described is a method for alleviating the tissue-destructive effects associated with hyperoxia. Methods and compositions for maintaining the viability of tissues and organs, particularly living tissues and organs to be transplanted, including protecting them from ischemia-reperfusion injury, together with methods for protecting tissues and organs from the tissue destructive effects of chronic inflammatory diseases, such as arthritis, psoriasis, dermatitis, including contact dermatitis, IBD and other chronic inflammatory diseases of the gastrointestinal tract, as well as the tissue destructive effects associated

with other, known autoimmune diseases, such as diabetes, multiple sclerosis, amyotrophic lateral sclerosis (ALS), and other autoimmune neurodegenerative diseases are also described herein.

[0025] The morphogen may be provided to the damaged tissue following an initial injury to the tissue. The morphogen may be provided directly to the tissue, as by injection to the damaged tissue site or by topical administration, or may be provided indirectly, e.g., systemically by oral or parenteral means. Alternatively, as described above, an agent capable of stimulating endogenous morphogen expression and/or secretion may be administered to the mammal. Preferably, the agent can stimulate an endogenous morphogen in cells associated with the damaged tissue. Alternatively, morphogen expression and/or secretion may be stimulated in a distant tissue and the morphogen transported to the damaged tissue by the circulatory system.

[0026] The morphogen may also be provided to tissue at risk of damage due to immune cell-mediated tissue destruction. Examples of such tissues include tissue grafts and tissue or organ transplants, as well as any tissue or organ about to undergo a surgical procedure or other clinical procedure likely to either inhibit blood flow to the tissue or otherwise induce an inflammatory response. Here the morphogen or morphogen-stimulating agent preferably is provided to the patient prior to induction of the injury, e.g., as a prophylactic, to provide a cyto-protective effect to the tissue at risk.

[0027] Where the tissue at risk comprises a tissue or organ to be transplanted, the tissue or organ to be transplanted preferably is exposed to a morphogen prior to transplantation. Most preferably, the tissue or organ is exposed to the morphogen prior to its removal from the donor, by providing the donor with a composition comprising a morphogen or morphogen-stimulating agent. Alternatively or, in addition, once removed from the donor, the organ or tissue is placed in a preservation solution containing a morphogen or morphogen-stimulating agent. In addition, the recipient also preferably is provided with a morphogen or morphogen-stimulating agent just prior to, or concommitant with, transplantation. In all cases, the morphogen or morphogen-stimulating agent may be administered directly to the tissue at risk, as by injection or topical administration to the tissue, or it may be provided systemically, either by oral or parenteral administration.

[0028] The morphogens described herein are envisioned to be useful in enhancing viability of any organ or living tissue to be transplanted. The morphogens may be used to particular advantage in lung, heart, liver, kidney or pancreas transplants, as well as in transplantation and/or grafting of bone marrow, skin, gastrointestinal mucosa, and other living tissues.

[0029] Where the patient suffers from a chronic inflammatory disease, such as diabetes, arthritis, psoriasis, IBD, and the like, the morphogen or morphogen-stimulating agent preferably is administered at regular intervals as a prophylactic, to prevent and/or inhibit the tissue damage normally associated with the disease during flare periods. As above, the morphogen or morphogen-stimulating agent may be provided directly to the tissue at risk, for example by injection or by topical administration, or indirectly, as by systemic e.g., oral or parenteral administration.

[0030] Among the morphogens useful in this invention are proteins originally identified as osteogenic proteins, such as the OP-1, OP-2 and CBMP2 proteins, as well as amino acid sequence-related proteins such as DPP (from Drosophila), Vgl (from Xenopus), Vgr-1 (from mouse, see U.S. 5,011,691 to Oppermann et al.), GDF-1 (from mouse, see Lee (1991) PNAS 88:4250-4254), all of which are presented in Table II and Seq. ID Nos.5-14), and the recently identified 60A protein (from Drosophila, Seq. ID No. 24, see Wharton et al. (1991) PNAS 88:9214-9218.) The members of this family, which include members of the TGF-β super-family of proteins, share substantial amino acid sequence homology in their C-terminal regions. The proteins are translated as a precursor, having an N-terminal signal peptide sequence, typically less than about 30 residues, followed by a "pro" domain that is cleaved to yield the mature sequence. The signal peptide is cleaved rapidly upon translation, at a cleavage site that can be predicted in a given sequence using the method of Von Heijne ((1986) Nucleic Acids Research 14:4683-4691.) Table I, below, describes the various morphogens identified to date, including their nomenclature as used herein, their Seq. ID references, and publication sources for the amino acid sequences for the full length proteins not included in the Seq. Listing.

# TABLE I

"OP-1" Refers generically to the group of morphogenically active proteins expressed from part or all of a DNA sequence encoding OP-1 protein, including allelic and species variants thereof, e.g., human

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OP-1 ("hOP-1", Seq. ID No. 5, mature protein amino acid sequence), or mouse OP-1 ("mOP-1", Seq. ID No. 6, mature protein amino acid sequence.) The conserved seven cysteine skeleton is defined by residues 38 to 139 of Seq. ID Nos. 5 and 6. The cDNA sequences and the amino acids encoding the full length proteins are provided in Seq. Id Nos. 16 and 17 (hOP1) and Seq. ID Nos. 18 and 19 (mOP1.) The mature proteins are defined by residues 293-431 (hOP1) and 292-430 (mOPl). The "pro" regions of the proteins, cleaved to yield the mature, morphogenically active proteins are defined essentially by residues 30-292 (hOP1) and residues 30-291 (mOP1).

"OP-2"

refers generically to the group of active proteins expressed from part or all of a DNA sequence encoding OP-2 protein, including allelic and species variants thereof, e.g., human OP-2 ("hOP-2", Seq. ID No. 7, mature protein amino acid sequence) or mouse OP-2 ("mOP-2", Seq. ID No. 8, mature protein amino acid sequence). The conserved seven cysteine skeleton is defined by residues 38 to 139 of Seg. ID Nos. 7 and 8. The cDNA sequences and the amino acids encoding the full length proteins are provided in Seq. ID Nos. 20 and 21 (hOP2) and Seq. ID Nos. 22 and 23 (mOP2.) The mature proteins are defined essentially by residues 264-402 (hOP2) and 261-399 (mOP2). The "pro"

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regions of the proteins, cl aved to yield th mature, morphogenically active proteins likely are defined essentially by residues 18-263 (hOP2) and residues 18-260 (mOP2). (Another cleavage site also occurs 21 residues upstream for both OP-2 proteins.)

"CBMP2"

refers generically to the morphogenically active proteins expressed from a DNA sequence encoding the CBMP2 proteins, including allelic and species variants thereof, e.g., human CBMP2A ("CBMP2A(fx)", Seq ID No. 9) or human CBMP2B DNA ("CBMP2B(fx)", Seq. ID No. 10). The amino acid sequence for the full length proteins, referred to in the literature as BMP2A and BMP2B, or BMP2 and BMP4, appear in Wozney, et al. (1988) Science 242:1528-1534. The pro domain for BMP2 (BMP2A) likely includes residues 25-248 or 25-282; the mature protein, residues 249-396 or 283-396. The pro domain for BMP4 (BMP2B) likely includes residues 25-256 or 25-292; the mature protein, residues 257-408 or

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"DPP(fx)" refers to protein sequences encoded by the Drosophila DPP gene and defining the conserved seven cysteine skeleton (Seq. ID No. 11). The amino acid sequence for the full length protein appears in Padgett, et

293-408.

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al (1987) <u>Nature 325</u>: 81-84. The pro domain likely extends from the signal peptide cleavage site to residue 456; the mature protein likely is defined by residues 457-588.

"Vgl(fx)" refers to protein sequences encoded by the Xenopus Vgl gene and defining the conserved seven cysteine skeleton (Seq. ID No. 12). The amino acid sequence for the full length protein appears in Weeks (1987) Cell 51: 861-867. The prodomain likely extends from the signal peptide cleavage site to residue 246; the mature protein likely is defined by residues 247-360.

"Vgr-1(fx)" refers to protein sequences encoded by the murine Vgr-1 gene and defining the conserved seven cysteine skeleton (Seq. ID No. 13). The amino acid sequence for the full length protein appears in Lyons, et al, (1989) PNAS 86: 4554-4558. The prodomain likely extends from the signal peptide cleavage site to residue 299; the mature protein likely is defined by residues 300-438.

"GDF-1(fx)" refers to protein sequences encoded by the human GDF-1 gene and defining the conserved seven cysteine skeleton (Seq. ID No. 14). The cDNA and encoded amino sequence for the full length protein is

provided in Seq. ID. No. 32. The prodomain likely extends from the signal p ptide clavage sit to residue 214; the mature protein likely is defined by residues 215-372.

"60A"

refers generically to the morphogenically active proteins expressed from part or all of a DNA sequence (from the Drosophila 60A gene) encoding the 60A proteins (see Seq. ID No. 24 wherein the cDNA and encoded amino acid sequence for the full length protein is provided). "60A(fx)" refers to the protein sequences defining the conserved seven cysteine skeleton (residues 354 to 455 of Seq. ID No. 24.) The prodomain likely extends from the signal peptide cleavage site to residue 324; the mature protein likely is defined by residues 325-455.

"BMP3(fx)"

refers to protein sequences encoded by the human BMP3 gene and defining the conserved seven cysteine skeleton (Seq. ID No. 26). The amino acid sequence for the full length protein appears in Wozney et al. (1988) Science 242: 1528-1534. The prodomain likely extends from the signal peptide cleavage site to residue 290; the mature protein likely is defined by residues 291-472.

"BMP5(fx)" refers to protein sequences encoded by the human BMP5 gen and defining the conserved seven cysteine skeleton (Seq. ID No. 27).

The amino acid sequence for the full length protein appears in Celeste, et al.

(1991) PNAS 87: 9843-9847. The pro domain likely extends from the signal peptide cleavage site to residue 316; the mature protein likely is defined by residues

317-454.

"BMP6(fx)"

refers to protein sequences encoded by the human BMP6 gene and defining the conserved seven cysteine skeleton (Seq. ID No. 28). The amino acid sequence for the full length protein appears in Celeste, et al. (1990) PNAS 87: 9843-5847. The pro domain likely includes extends from the signal peptide cleavage site to residue 374; the mature sequence likely includes residues 375-513.

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[0031] The OP-2 proteins have an additional cysteine residue in this region (e.g., see residue 41 of Seq. ID Nos. 7 and 8), in addition to the conserved cysteine skeleton in common with the other proteins in this family. The GDF-1 protein has a four amino acid insert within the conserved skeleton (residues 44-47 of Seq. ID No. 14) but this insert likely does not interfere with the relationship of the cysteines in the folded structure. In addition, the CBMP2 proteins are missing one amino acid residue within the cysteine skeleton.

[0032] The morphogens are inactive when reduced, but are active as oxidized homodimers and when oxidized in combination with other morphogens of this invention (e.g., as heterodimers). Thus, as defined herein, a morphogen is a dimeric protein comprising a pair of polypeptide chains, wherein each polypeptide chain comprises at least the C-terminal six cysteine skeleton defined by residues 43-139 of Seq. ID No. 5, including functionally equivalent arrangements of these cysteines (e.g., amino acid insertions or deletions which alter the linear arrangement of the cysteines in the sequence but not their relationship in the folded structure), such that, when the polypeptide chains are folded, the dimeric protein species comprising the pair of polypeptide chains has the appropriate three-dimensional structure, including the appropriate intra-or inter-chain disulfide bonds such that the protein is capable of acting as a morphogen as defined herein. Specifically, the morphogens generally are capable of all of the following biological functions in a morphogenically permissive environment: stimulating proliferation of progenitor cells; stimulating the differentiation of progenitor cells; stimulating the proliferation of differentiated cells; and supporting the growth and maintenance of differentiated cells, including the "redifferentiation" of transformed cells. In addition, it is also anticipated that these morphogens are capable of inducing redifferentiation of committed cells under appropriate environmental conditions.

[0033] In one preferred aspect, the morphogens of this invention comprise one of two species of generic amino acid sequences: Generic Sequence 1 (Seq. ID No. 1) or Generic Sequence 2 (Seq. ID No. 2); where each Xaa indicates one of the 20 naturally-occurring L-isomer, α-amino acids or a derivative thereof. Generic Sequence 1 comprises the conserved six cysteine skeleton and Generic Sequence 2 comprises the conserved six cysteine skeleton plus the additional cysteine identified in OP-2 (see residue 36, Seq. ID No. 2). In another preferred aspect, these sequences further

comprise the following additional sequence at their N-terminus:

Cys Xaa Xaa Xaa Xaa (Seq. ID No. 15)

[0034] Preferred amino acid sequences within the foregoing generic sequences include: Generic Sequence 3 (Seq. ID No. 3), Generic Sequence 4 (Seq. ID No. 4), Generic Sequence 5 (Seq. ID No. 30) and Generic Sequence 6 (Seq. ID No. 31), listed below. These Generic Sequences accommodate the homologies shared among the various preferred members of this morphogen family identified in Table II, as well as the amino acid sequence variation among them. Specifically, Generic Sequences 3 and 4 are composite amino acid sequences of the following proteins presented in Table II and identified in Seq. ID Nos. 5-14: human OP-1 (hOP-1, Seq. ID Nos. 5 and 16-17), mouse OP-1 (mOP-1, Seq. ID Nos. 6 and 18-19), human and mouse OP-2 (Seq. ID Nos. 7, 8, and 20-22), CBMP2A (Seq. ID No. 9), CBMP2B (Seq. ID No. 10), DPP (from Drosophila, Seq. ID No. 11), Vgl, (from Xenopus, Seq. ID No. 12), Vgr-1 (from mouse, Seq. ID No. 13), and GDF-1 (from mouse, Seq. ID No. 14.) The generic sequences include both the amino acid identity shared by the sequences in Table II, as well as alternative residues for the variable positions within the sequence. Note that these generic sequences allow for an additional cysteine at position 41 or 46 in Generic Sequences 3 or 4, respectively, providing an appropriate cysteine skeleton where inter- or intramolecular disulfide bonds can form, and contain certain critical amino acids which influence the tertiary structure of the proteins.

	Generic Sequenc 3									
5		Le	u Ty	r Vai	l Xa	a Ph	e			
5		1				5				
	Xaa	Xaa	Xaa	Gly	Trp	Xaa	Xaa	Trp	Xaa	
10					10					
	Xaa	Ala	Pro	Xaa	Gly	Xaa	Xaa	Ala		
45	15					20				
15	Xaa	Tyr	Cys	Xaa	Gly	Xaa	Cys	Xaa		
			25					30		
20	Xaa	Pro	Xaa	Xaa	Xaa	Xaa	Xaa			
					35					
	Xaa	Xaa	Xaa	Asn	His	Ala	Xaa	Xaa		
25			40					45		
	Xaa	Xaa	Leu	Xaa	Xaa	Xaa	Xaa	Xaa		
30					50					
	Xaa	Xaa	Xaa	Xaa	Xaa	Xaa	Xaa	Cys		
		55					60			
35	Cys	Xaa	Pro	Xaa	Xaa	Xaa	Xaa	Xaa		
				65						
40										
	Va	a Va	a Xa	. T.	u Va	a Ya	s Ys			
		0	ia na	O DC	u na	7		4		
45			a Ya	a Ya	a Va			u Xa	<b>a</b>	
	Au	u nu	u Au	8 8		- nu	u De	u Au		
50	Ya	a Ya	a Ya			+ Ya	a Va	l Xa	<b>a</b>	
		5	u ng	u Au	a ne		0	I AU	-	
			s Gl	ע ריי	e Ya		•			
55	AG	. L Cy		.y cy 15	JAG	u.				

wherein each Xaa is independently selected from a group of one or more specified amino acids defined as follows: "Res." means "residu" and Xaa at res.4 = (Ser, Asp or Glu); Xaa at res.6 = (Arg, Gln, Ser or Lys); Xaa at res.7 = (Asp or Glu); Xaa at res.8 = (Leu or Val); Xaa at res.11 = (Gln, Leu, Asp, His or Asn); Xaa at res.12 = (Asp, Arg or Asn); Xaa at res.14 = (Ile or Val); Xaa at res.15 = (Ile or Val); Xaa at res.18 = (Glu, Gln, Leu, Lys, Pro or Arg); Xaa at res.20 = (Tyr or Phe); Xaa at res.21 = (Ala, Ser, Asp, Met, His, Leu or Gln); Xaa at r s.23 = (Tyr, Asn or Phe); Xaa at res.26 = (Glu, His, Tyr, Asp or Gln); Xaa at res.28 = (Glu, Lys, Asp or Gln); Xaa at res.30 = (Ala, Ser, Pro or Gln); Xaa at res.31 = (Phe, Leu or Tyr); Xaa at res.33 = (Leu or Val); Xaa at res.34 = (Asn, Asp, Ala or Thr); Xaa at res.35 = (Ser, Asp, Glu, Leu or Ala); Xaa at res.36 = (Tyr, Cys, His, Ser or Ile); Xaa at res.37 = (Met, Phe, Gly or Leu); Xaa at res.38 = (Asn or Ser); Xaa at res.39 = (Ala, Ser or Gly); Xaa at res.40 = (Thr, Leu or Ser); Xaa at res.44 = (lle or Val); Xaa at res.45 = (Val or Leu); Xaa at res.46 = (Gln or Arg); Xaa at res.47 = (Thr, Ala or Ser); Xaa at res.49 = (Val or Met); Xaa at res.50 = (His or Asn); Xaa at res.51 = (Phe, Leu, Asn, Ser, Ala or Val); Xaa at res.52 = (Ile, Met, Asn, Ala or Val); Xaa at res.53 = (Asn, Lys, Ala or Glu); Xaa at res.54 = (Pro or Ser); Xaa at res.55 = (Glu, Asp, Asn, or Gly); Xaa at res.56 = (Thr, Ala, Val, Lys, Asp, Tyr, Ser or Ala); Xaa at res.57 = (Val, Ala or IIe); Xaa at res.58 = (Pro or Asp); Xaa at res.59 = (Lys or Leu); Xaa at res.60 = (Pro or Ala); Xaa at res.63 = (Ala or Val); Xaa at res.65 = (Thr or Ala); Xaa at res.66 = (Gln, Lys, Arg or Glu); Xaa at res.67 = (Leu, Met or Val); Xaa at res.68 = (Asn, Ser or Asp); Xaa at res.69 = (Ala, Pro or Ser); Xaa at res.70 = (Ile, Thr or Val); Xaa at res.71 = (Ser or Ala); Xaa at res.72 = (Val or Met); Xaa at res.74 = (Tyr or Phe); Xaa at res.75 = (Phe, Tyr or Leu); Xaa at res.76 = (Asp or Asn); Xaa at res.77 = (Asp, Glu, Asn or Ser); Xaa at res.78 = (Ser, Gin, Asn or Tyr); Xaa at res.79 = (Ser, Asn, Asp or Glu); Xaa at res.80 = (Asn, Thr or Lys); Xaa at res.82 = (Ile or Val); Xaa at res.84 = (Lys or Arg); Xaa at res.85 = (Lys, Asn, Gln or His); Xaa at res.86 = (Tyr or His); Xaa at res.87 = (Arg, Gln or Glu); Xaa at res.88 = (Asn, Glu or Asp); Xaa at res.90 = (Val, Thr or Ala); Xaa at res.92 = (Arg, Lys, Val, Asp or Glu); Xaa at res.93 = (Ala, Gly or Glu); and Xaa at res.97 = (His or Arg);

# Generic Sequence 4

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	Xaa	Pro	Xaa	Xaa	Xaa	Xaa	Xaa	
					40			
5	Xaa	Xaa	Xaa	Asn	His	Ala	Xaa	Xaa
			45					50
	Xaa	Xaa	Leu	Xaa	Xaa	Xaa	Xaa	Xaa
					55			
10	Xaa	Cys						
		60					65	
	Cys	Xaa	Pro	Xaa	Xaa	Xaa	Xaa	Xaa
15				70				
	Xaa	Xaa	Xaa	Leu	Xaa	Xaa	Xaa	
	75					80		
20	Xaa	Xaa	Xaa	Xaa	Val	Xaa	Leu	Xaa
				85				
	Xaa	Xaa	Xaa	Xaa	Met	Xaa	Val	Xaa
	90					95		
25	Xaa	Cys	Gly	Cys	Xaa			
			100					

wherein each Xaa is independently selected from a group of one or more specified amino acids as defined by the following: "Res." means "residue" and Xaa at res.2 = (Lys or Arg); Xaa at res.3 = (Lys or Arg); Xaa at res.4 = (His or Arg); Xaa at res.5 = (Glu, Ser, His, Gly, Arg or Pro); Xaa at res.9 = (Ser, Asp or Glu); Xaa at res.11 = (Arg, Gln, Ser or Lys); Xaa at res.12 = (Asp or Glu); Xaa at res.13 = (Leu or Val); Xaa at res.16 = (Gln, Leu, Asp, His or Asn); Xaa at res.17 = (Asp, Arg, or Asn); Xaa at res.19 = (Ile or Val); Xaa at res.20 = (Ile or Val); Xaa at res.23 = (Glu, Gln, Leu, Lys, Pro or Arg); Xaa at res.25 = (Tyr or Phe); Xaa at res.26 = (Ala, Ser, Asp, Met, His, Leu, or Gln); Xaa at res.28 = (Tyr, Asn or Phe); Xaa at res.31 = (Glu, His, Tyr, Asp or Gln); Xaa at res.33 = Glu, Lys, Asp or Gln); Xaa at res.35 = (Ala, Ser or Pro); Xaa at res.36 = (Phe, Leu or Tyr); Xaa at res.38 = (Leu or Val); Xaa at res.39 = (Asn, Asp, Ala or Thr); Xaa at res.40 = (Ser, Asp, Glu, Leu or Ala); Xaa at res.41 = (Tyr, Cys, His, Ser or Ile); Xaa at res.42 = (Met, Phe, Gly or Leu); Xaa at res.44 = (Ala, Ser or Gly); Xaa at res.45 = (Thr, Leu or Ser); Xaa at res.49 = (Ile or Val); Xaa at res.50 = (Val or Leu); Xaa at res.51 = (Gin or Arg); Xaa at res.52 = (Thr, Ala or Ser); Xaa at res.54 = (Val or Met); Xaa at res.55 = (His or Asn); Xaa at res.56 = (Phe, Leu, Asn, Ser, Ala or Val); Xaa at res.57 = (Ile, Met, Asn, Ala or Val); Xaa at res.58 = (Asn, Lys, Ala or Glu); Xaa at res.59 = (Pro or Ser); Xaa at res.60 = (Glu, Asp, or Gly); Xaa at res.61 = (Thr, Ala, Val, Lys, Asp, Tyr, Ser or Ala); Xaa at res.62 = (Val, Ala or Ile); Xaa at res.63 = (Pro or Asp); Xaa at res.64 = (Lys or Leu); Xaa at res.65 = (Pro or Ala); Xaa at res.68 = (Ala or Val); Xaa at res.70 = (Thr or Ala); Xaa at res.71 = (Gln, Lys, Arg or Glu); Xaa at res.72 = (Leu, Met or Val); Xaa at res.73 = (Asn, Ser or Asp); Xaa at res.74 = (Ala, Pro or Ser); Xaa at res.75 = (Ile, Thr or Val); Xaa at res.76 = (Ser or Ala); Xaa at res.77 = (Val or Met); Xaa at res.79 = (Tyr or Phe); Xaa at res.80 = (Phe. Tyr or Leu); Xaa at res.81 = (Asp or Asn); Xaa at res.82 = (Asp, Glu, Asn or Ser); Xaa at res.83 = (Ser, Gln, Asn or Tyr); Xaa at res.84 = (Ser, Asn, Asp or Glu); Xaa at res.85 = (Asn, Thr or Lys); Xaa at res.87 = (Ile or Val); Xaa at res.89 = (Lys or Arg); Xaa at res.90 = (Lys, Asn, Gln or His); Xaa at res.91 = (Tyr or His); Xaa at res.92 = (Arg, Gln or Glu); Xaa at res.93 = (Asn, Glu or Asp); Xaa at res.95 = (Val, Thr or Ala); Xaa at res.97 = (Arg, Lys, Val, Asp or Glu); Xaa at res.98 = (Ala, Gly or Glu); and Xaa at res.102 = (His or Arg).

[0035] Similarly, Generic Sequence 5 (Seq. ID No. 30) and Generic Sequence 6 (Seq. ID No. 31) accommodate the homologies shared among all the morphogen protein family members identified in Table II. Specifically, Generic Sequences 5 and 6 are composite amino acid sequences of human OP-1 (hOP-1, Seq. ID Nos. 5 and 16-17), mouse OP-1 (mOP-1, Seq. ID Nos. 6 and 18-19), human and mouse OP-2 (Seq. ID Nos. 7, 8, and 20-22), CBMP2A (Seq. ID No. 9), CBMP2B (Seq. ID No. 10), DPP (from Drosophila, Seq. ID No. 11), Vgl, (from Xenopus, Seq. ID No. 12), Vgr-1 (from mouse, Seq. ID No. 13), and GDF-1 (from mouse, Seq. ID No. 14), human BMP3 (Seq. ID No. 26), human BMP5 (Seq. ID No. 27), human BMP6 (Seq. ID No. 28) and 60(A) (from Drosophila, Seq. ID Nos. 24-25). The generic

sequences include both the amino acid identity shared by these sequences in the C-terminal domain, defined by the six and seven cysteine skeletons (Generic Sequences 5 and 6, respectively), as well as alternativ r sidues for the variable positions within the sequence. As for Generic Sequences 3 and 4, Generic Sequences 5 and 6 allow for an additional cysteine at position 41 (Generic Sequence 5) or position 46 (Generic Sequence 6), providing an appropriate cysteine skeleton where inter- or intramolecular disulfide bonds can form, and containing certain critical amino acids which influence the tertiary structure of the proteins.

# Generic Sequence 5

10 Leu Xaa Xaa Xaa Phe

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Xaa Xaa Xaa Gly Trp Xaa Xaa Trp Xaa

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	Xaa	Xaa	Pro	Xaa	Xaa	Xaa	X a	Ala
5	15					20		
	Xaa	Tyr	Cys	Xaa	Gly	Xaa	Cys	Xaa
			25					30
10	Xaa	Pro	Xaa	Xaa	Xaa	Xaa	Xaa	
					35			
	Xaa	Xaa	Xaa	Asn	His	Ala	Xaa	Xaa
15			40					45
	Xaa							
20					50			
	Xaa	Cys						
		55					60	
25	Cys	Xaa	Pro	Xaa	Xaa	Xaa	Xaa	Xaa
				65				
3 <i>0</i>	Xaa	Xaa	Xaa	Leu	Xaa	Xaa	Xaa	
	70					75		
	Xaa	Xaa	Xaa	Xaa	Val	Xaa	Leu	Xaa
35				80				
	Xaa	Xaa	Xaa	Xaa	Met	Xaa	Val	Xaa
40	85					90		
	Xaa	Cys	Xaa	Cys	Xaa			
			95					

wherein each Xaa is independently selected from a group of one or more specified amino acids defined as follows: "Res." means "residue" and Xaa at res.2 = (Tyr or Lys); Xaa at res.3 = Val or Ile); Xaa at res.4 = (Ser, Asp or Glu); Xaa at res.6 = (Arg, Gln, Ser, Lys or Ala); Xaa at res.7 = (Asp, Glu or Lys); Xaa at res.8 = (Leu, Val or Ile); Xaa at res.11 = (Gln, Leu, Asp, His, Asn or Ser); Xaa at res.12 = (Asp, Arg, Asn or Glu); Xaa at res.14 = (Ile or Val); Xaa at res.15 = (Ile or Val); Xaa at res.16 (Ala or Ser); Xaa at res.18 = (Glu, Gln, Leu, Lys, Pro or Arg); Xaa at res.19 = (Gly or Ser); Xaa at res.20 = (Tyr or Phe); Xaa at res.21 = (Ala, Ser, Asp, Met, His, Gln, Leu or Gly); Xaa at res.23 = (Tyr, Asn or Phe); Xaa at res.26 = (Glu, His, Tyr, Asp, Gln or Ser); Xaa at res.28 = (Glu, Lys, Asp, Gln or Ala); Xaa at res.30 = (Ala, Ser, Pro, Gln or Asn); Xaa at res.31 = (Phe, Leu or Tyr); Xaa at res.33 = (Leu, Val or Met); Xaa at res.34 = (Asn, Asp, Ala, Thr or Pro); Xaa at res.35 = (Ser, Asp, Glu, Leu, Ala or Lys); Xaa at res.36 = (Tyr, Cys, His, Ser or Ile); Xaa at res.37 = (Met, Phe, Gly or Leu); Xaa at res.38 = (Asn, Ser or Lys); Xaa at res.39 = (Ala, Ser, Gly or Pro); Xaa at res.40 = (Thr, Leu or Ser); Xaa at res.44 = (Ile, Val or Thr); Xaa at res.45 = (Val, Leu or Ile); Xaa at res.50 = (His, Asn or Arg); Xaa at res.51 = (Phe, Leu, Asn, Ser, Ala or Val); Xaa at res.52 = (Ile, Met, Asn, Ala, Val or Leu); Xaa at res.53 = (Asn, Lys, Ala, Glu, Gly

or Phe); Xaa at res.54 = (Pro, Ser or Val); Xaa at res.55 = (Glu, Asp, Asn, Gly, Val or Lys); Xaa at res.56 = (Thr, Ala, Val, Lys, Asp, Tyr, Ser, Ala, Pro or His); Xaa at res.57 = (Val, Ala or Ile); Xaa at res.58 = (Pro or Asp); Xaa at res.59 = (Lys, Leu or Glu); Xaa at res.60 = (Pro or Ala); Xaa at res.63 = (Ala or Val); Xaa at res.65 = (Thr, Ala or Glu); Xaa at res.66 = (Gln, Lys, Arg or Glu); Xaa at res.67 = (Leu, Met or Val); Xaa at res.68 = (Asn, Ser, Asp or Gly); Xaa at res.69 = (Ala, Pro or Ser); Xaa at res.70 = (Ile, Thr, Val or Leu); Xaa at res.71 = (Ser, Ala or Pro); Xaa at res.72 = (Val, Met or Ile); Xaa at res.74 = (Tyr or Phe); Xaa at res.75 = (Phe, Tyr, Leu or His); Xaa at res.76 = (Asp, Asn or Leu); Xaa at res.77 = (Asp, Glu, Asn or Ser); Xaa at res.78 = (Ser, Gln, Asn, Tyr or Asp); Xaa at res.79 = (Ser, Asn, Asp, Glu or Lys); Xaa at res.80 = (Asn, Thr or Lys); Xaa at res.82 = (Ile, Val or Asn); Xaa at res.84 = (Lys or Arg); Xaa at res.85 = (Lys, Asn, Gln, His or Val); Xaa at res.86 = (Tyr or His); Xaa at res.87 = (Arg, Gln, Glu or Pro); Xaa at res.88 = (Asn, Glu or Asp); Xaa at res.90 = (Val, Thr, Ala or Ile); Xaa at res.92 = (Arg, Lys, Val, Asp or Glu); Xaa at res.93 = (Ala, Gly, Glu or Ser); Xaa at res.95 = (Gly or Ala) and Xaa at res.97 = (His or Arg).

# Generic Sequence 6

Cys Xaa Xaa Xaa Xaa Leu Xaa Xaa Xaa Phe Xaa Xaa Xaa Gly Trp Xaa Xaa Trp Xaa Xaa Xaa Pro Xaa Xaa Xaa Ala Xaa Tyr Cys Xaa Gly Xaa Cys Xaa Xaa Pro Xaa Xaa Xaa Xaa Xaa Xaa Xaa Asn His Ala Xaa Cys Cys Xaa Pro Xaa Xaa Xaa Xaa Xaa 

Xaa Xaa Xaa Leu Xaa Xaa Xaa 75 80

Xaa Xaa Xaa Xaa Xaa Val Xaa Leu Xaa 85

Xaa Xaa Xaa Xaa Xaa Met Xaa Val Xaa 90 95

Xaa Cys Xaa Cys Xaa 100

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wherein each Xaa is independently selected from a group of one or more specified amino acids as defined by the following: "Res." means "residue" and Xaa at res.2 = (Lys, Arg, Ala or Gln); Xaa at res.3 = (Lys, Arg or Met); Xaa at res.4 = (His, Arg or Gln); Xaa at res.5 = (Glu, Ser, His, Gly, Arg, Pro, Thr, or Tyr); Xaa at res.7 = (Tyr or Lys); Xaa at res.8 = (Val or IIe); Xaa at res.9 = (Ser, Asp or Glu); Xaa at res.11 = (Arg, Gln, Ser, Lys or Ala); Xaa at res.12 = (Asp, Glu, or Lys); Xaa at res.13 = (Leu, Val or IIe); Xaa at res.16 = (Gln, Leu, Asp, His, Asn or Ser); Xaa at res.17 = (Asp, Arg, Asn or Glu); Xaa at res.19 = (lle or Val); Xaa at res.20 = (lle or Val); Xaa at res.21 = (Ala or Ser); Xaa at res.23 = (Glu. Gln. Leu, Lys, Pro or Arg); Xaa at res.24 = (Gly or Ser); Xaa at res.25 = (Tyr or Phe); Xaa at res.26 = (Ala, Ser, Asp, Met, His, Gln, Leu, or Gly); Xaa at res.28 = (Tyr, Asn or Phe); Xaa at res.31 = (Glu, His, Tyr, Asp, Gln or Ser); Xaa at res.33 = Glu, Lys, Asp, Gln or Ala); Xaa at res.35 = (Ala, Ser, Pro, Gln or Asn); Xaa at res.36 = (Phe, Leu or Tyr); Xaa at res.38 = (Leu, Val or Met); Xaa at res.39 = (Asn, Asp, Ala, Thr or Pro); Xaa at res.40 = (Ser, Asp, Glu, Leu, Ala or Lys); Xaa at res.41 = (Tyr, Cys, His, Ser or Ile); Xaa at res.42 = (Met, Phe, Gly or Leu); Xaa at res.43 = (Asn, Ser or Lys); Xaa at res.44 = (Ala, Ser, Gly or Pro); Xaa at res.45 = (Thr, Leu or Ser); Xaa at res.49 = (lle, Val or Thr); Xaa at res.50 = (Val, Leu or IIe); Xaa at res.51 = (Gin or Arg); Xaa at res.52 = (Thr, Ala or Ser); Xaa at res.53 = (Leu or IIe); Xaa at res.54 = (Val or Met); Xaa at res.55 = (His, Asn or Arg); Xaa at res.56 = (Phe, Leu, Asn, Ser, Ala or Val); Xaa at res.57 = (Ile, Met, Asn, Ala, Val or Leu); Xaa at res.58 = (Asn, Lys, Ala, Glu, Gly or Phe); Xaa at res.59 = (Pro, Ser or Val); Xaa at res.60 = (Glu, Asp, Gly, Val or Lys); Xaa at res.61 = (Thr, Ala, Val, Lys, Asp, Tyr, Ser, Ala, Pro or His); Xaa at res.62 = (Val, Ala or IIe); Xaa at res.63 = (Pro or Asp); Xaa at res.64 = (Lys, Leu or Glu); Xaa at res.65 = (Pro or Ala); Xaa at res.68 = (Ala or Val); Xaa at res.70 = (Thr, Ala or Glu); Xaa at res.71 = (Gln, Lys, Arg or Glu); Xaa at res.72 = (Leu, Met or Val); Xaa at res.73 = (Asn, Ser, Asp or Gly); Xaa at res.74 = (Ala, Pro or Ser); Xaa at res.75 = (Ile, Thr, Val or Leu); Xaa at res.76 = (Ser, Ala or Pro); Xaa at res.77 = (Val, Met or Ile); Xaa at res.79 = (Tyr or Phe); Xaa at res.80 = (Phe, Tyr, Leu or His); Xaa at res.81 = (Asp, Asn or Leu); Xaa at res.82 = (Asp, Glu, Asn or Ser); Xaa at res.83 = (Ser, Gln, Asn, Tyr or Asp); Xaa at res.84 = (Ser, Asn, Asp, Glu or Lys); Xaa at res.85 = (Asn, Thr or Lys); Xaa at res.87 = (Ile, Val or Asn); Xaa at res.89 = (Lys or Arg); Xaa at res.90 = (Lys, Asn, Gln, His or Val); Xaa at res.91 = (Tyr or His); Xaa at res.92 = (Arg, Gln, Glu or Pro); Xaa at res.93 = (Asn, Glu or Asp); Xaa at res.95 = (Val, Thr, Ala or Ile); Xaa at res.97 = (Arg, Lys, Val, Asp or Glu); Xaa at res.98 = (Ala, Gly, Glu or Ser); Xaa at res.100 = (Gly or Ala); and Xaa at res.102 = (His or Arg).

Particularly useful sequences for use as morphogens in this invention include the C-terminal domains, e.g., [0036] the C-terminal 96-102 amino acid residues of VgI, Vgr-1, DPP, OP-1, OP-2, CBMP-2A, CBMP-2B, GDF-1 (see Table II, below, and Seq. ID Nos. 5-14), as well as proteins comprising the C-terminal domains of 60A, BMP3, BMP5 and BMP6 (see Seq. ID Nos. 24-28), all of which include at least the conserved six or seven cysteine skeleton. In addition, biosynthetic constructs designed from the generic sequences, such as COP-1, 3-5, 7, 16, disclosed in U.S. Pat. No. 5,011,691, also are useful. Other sequences include the inhibins/activin proteins (see, for example, U.S. Pat. Nos. 4.968,590 and 5.011,691). Accordingly, other useful sequences are those sharing at least 70% amino acid sequence homology or "similarity", and preferably 80% homology or similarity with any of the sequences above. These are anticipated to include allelic and species variants and mutants, and biosynthetic muteins, as well as novel members of this morphogenic family of proteins. Particularly envisioned in the family of related proteins are those proteins exhibiting morphogenic activity and wherein the amino acid changes from the preferred sequences include conservative changes, e.g., those as defined by Dayoff et al., Atlas of Protein Sequence and Structure; vol. 5, Suppl. 3, pp. 345-362, (M.O. Dayoff, ed., Nat'l BioMed. Research Fdn., Washington, D.C. 1979). As used herein, potentially useful sequences are aligned with a known morphogen sequence using the method of Needleman et al. ((1970) J.Mol.Biol. 48:443-453) and identities calculated by the Align program (DNAstar, Inc.). "Homology" or "similarity" as used herein includes allowed conservative changes as defined by Dayoff et al.

[0037] The currently most preferred protein sequences useful as morphogens in this invention include thos having

greater than 60% identity, preferably greater than 65% identity, with the amino acid sequence defining the conserved six cysteine skeleton of hOP1 (e.g., residues 43-139 of Seq. ID No. 5). These most preferred sequences include both allelic and species variants of the OP-1 and OP-2 proteins, including the Drosophila 60A protein. Accordingly, in another preferred aspect of the invention, useful morphogens include active proteins comprising species of polypeptide chains having the generic amino acid sequence herein referred to as "OPX", which accommodates the homologies between the various identified species of OP1 and OP2 (Seq. ID No. 29).

[0038] The morphogens useful in the methods, composition and devices of this invention include proteins comprising any of the polypeptide chains described above, whether isolated from naturally-occurring sources, or produced by recombinant DNA or other synthetic techniques, and includes allelic and species variants of these proteins, naturally-occurring or biosynthetic mutants thereof, as well as various truncated and fusion constructs. Deletion or addition mutants also are envisioned to be active, including those which may alter the conserved C-terminal cysteine skeleton, provided that the alteration does not functionally disrupt the relationship of these cysteines in the folded structure. Accordingly, such active forms are considered the equivalent of the specifically described constructs disclosed herein. [0039] The proteins may include forms having varying glycosylation patterns, varying N-termini, a family of related

[0039] The proteins may include forms having varying glycosylation patterns, varying N-termini, a family of related proteins having regions of amino acid sequence homology, and active truncated or mutated forms of native or biosynthetic proteins, produced by expression of recombinant DNA in host cells.

[0040] The morphogenic proteins can be expressed from intact or truncated cDNA or from synthetic DNAs in procaryotic or eucaryotic host cells, and purified, cleaved, refolded, and dimerized to form morphogenically active compositions. Currently preferred host cells include <u>E. coli</u> or mammalian cells, such as CHO, COS or BSC cells. A detailed description of the morphogens useful in the methods, compositions and devices of this invention is disclosed in copending US patent application Serial Nos. 752,764, filed August 30, 1991, and 667,274, filed March 11, 1991.

[0041] Thus, in view of this disclosure, skilled genetic engineers can isolate genes from cDNA or genomic libraries of various different species which encode appropriate amino acid sequences, or construct DNAs from oligonucleotides, and then can express them in various types of host cells, including both procaryotes and eucaryotes, to produce large quantities of active proteins capable of protecting tissues and organs from immune cell-mediated tissue destruction, including substantially inhibiting such damage and/or regenerating the damaged tissue in a variety of mammals, including humans.

[0042] The foregoing and other objects, features and advantages of the present invention will be made more apparent from the following detailed description of the invention.

# **Brief Description of the Drawings**

# [0043]

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- FIG 1 shows the cardioprotective effects of morphogen (hOP1) in a rat myocardial ischemia-reperfusion model, as evidenced by the smaller loss of myocardial creatine kinase in hOP1-treated rats;
  - FIG 2 shows the effects of 20 µg of morphogen (hOP1 given 24 hours prior to isolation of rat heart on endothelial-dependent vasorelaxation to acetycholine following induced ischemia-reperfusion injury;
  - FIG 3 shows the effect of morphogen (hOP1) on neutrophil adherence to LTB<sub>4</sub>-stimulated mesenteric artery endothelium in neutrophil-activated rats;
- FIG 4 (A and B) are schematic representations of morphogen inhibition of early mononuclear phagocytic multinuclearization in vivo;
  - FIG 5 graphs the effect of a morphogen (e.g., OP-1) and a placebo control on mucositic lesion formation; and
- FIG 6 (A-D) graphs the effects of a morphogen (eg., OP-1, Figs. 6A and 6C) and TGF-β (Fig. 6B and 6D) on collagen (6A and 6B) and hyaluronic acid (6C and 6D) production in primary fibroblast cultures.

# **Detailed Description of the Invention**

[0044] It now has been surprisingly discovered that the morphogens defined herein are effective agents in alleviating the tissue destructive effects associated with the body's inflammatory response to tissue injury. In particular, as disclosed herein, the morphogens are capable of alleviating the necrotic tissue effects associated with the ensuing inflammatory responses that occur following an initial tissue injury.

[0045] When tissue injury occurs, whether caused by bacteria, trauma, chemicals, heat, or any other phenomenon,

the body's inflammatory response is stimulated. In response to signals released from the damaged cells ( .g., cytokines), extravascularization of immune effector cells is induced. Under ordinary circumstances these invading immune effector cells kill the infectious agent and/or infected or damaged cells (through the release of killing substances such as superoxides, perforins, and other antimicrobial agents stored in granules), remove the dead tissues and organisms (through phagocytosis), release various biological response modifiers that promote rapid healing and covering of the wound (quite often resulting in the formation of fibrotic scar tissue), and then, after the area is successfully healed, exit from the site of the initial insult. Once the site is perceived to be normal, the local release of inflammatory cytokines ceases and the display of adhesion molecules on the vessel endothelium returns to basal levels. In some cases, however, the zeal of these interacting signals and cellular systems, which are designed to capture and contain very rapidly multiplying infectious agents, act to the detriment of the body, killing additional, otherwise healthy, surrounding tissue. This additional unnecessary tissue death further compromises organ function and sometimes results in death of the individual. In addition, the resulting scar tissue that often forms can interfere with normal tissue function as occurs, for example, in idiopathic pulmonary fibrosis, IBD and organ cirrhosis.

The vascular endothelium constitutes the first barrier between circulating immune effector cells and extravascular tissues. Extravasation of these circulating cells requires that they bind to the vascular endothelial cells, cross the basement membrane, and enter insulted tissues e.g, by phagocytosis or protease-mediated extracellular matrix degradation. Without being limited to a particular theory, it is believed that the morphogens of this invention may modulate the inflammatory response in part by modulating the attachment of immune effector cells to the luminal side of the endothelium of blood vessels at or near sites of tissue damage and/or inflammatory lesions. Because the method reduces or prevents the attachment of immune effector cells at these sites, it also prevents the subsequent release of tissue destructive agents by these same immune effector cells at sites of tissue damage and/or inflammatory lesions. Because attachment of immune effector cells to the endothelium must precede their extravascularization, the method also prevents the initial or continued entry of these cells into extravascular sites of tissue destruction or ongoing inflammatory lesions. Therefore, the invention not only relates to a method to reduce or prevent the immune cell-mediated cellular destruction at extravascular sites of recent tissue destruction, but also relates to a method to prevent or reduce the continued entry of immune effector cells into extravascular sites of ongoing inflammatory cascades. As will be appreciated by those skilled in the art, the morphogens of this invention also may be contemplated in mechanisms for disrupting the functional interaction of immune effector cells with endothelium where the adhesion molecules are induced by means other than in response to tissue injury.

[0047] One source of tissue injury is induced by cell exposure to toxic oxygen concentrations, such as ischemic-reperfusion tissue injury (oxygen deprivation), and following hyperoxia injury (lethally high oxygen concentrations). Accordingly, the process of the present invention provides a method for alleviating the tissue damage induced by ischemic-reperfusion injury or hyperoxia-induced injury comprising the step of administering to the afflicted individual a therapeutic amount of a morphogen prior to, during, or after damage to the affected tissue. Where the toxic oxygen concentrations may be deliberately induced, as by a surgical or clinical procedure, the morphogen preferably is administered prior to induction.

[0048] In addition, the morphogens described herein, in contrast to fibrogenic growth factors such as TGF-β, stimulate tissue morphogenesis and do not stimulate fibrosis or scar tissue formation (see Example 9, below.) Accordingly, in addition to inhibiting the tissue destructive effects associated with the inflammatory response, the morphogens further enhance the viability of damaged tissue and/or organs by stimulating the regeneration of the damaged tissue and preventing fibrogenesis.

[0049] The morphogens described herein also can inhibit epithelial cell proliferation (see Example 10, below.) This activity of the morphogens also may be particularly useful in the treatment of psoriasis and other inflammatory diseases that involve epithelial cell populations.

[0050] Provided below are detailed descriptions of suitable morphogens useful in the methods and compositions of this invention, as well as methods for their administration and application, and numerous, nonlimiting examples which 1) illustrate the suitability of the morphogens and morphogen-stimulating agents described herein as therapeutic agents for protecting tissue from the tissue destructive effects associated with the body's inflammatory response; and 2) provide assays with which to test candidate morphogens and morphogen-stimulating agents for their efficacy.

# I. Useful Morphogens

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[0051] As defined herein a protein is morphogenic if it is capable of inducing the developmental cascade of cellular and molecular events that culminate in the formation of new, organ-specific tissue and comprises at least the conserved C-terminal six cysteine skeleton or its functional equivalent (see supra). Specifically, the morphogens generally are capable of all of the following biological functions in a morphogenically permissive environment: stimulating proliferation of progenitor cells; stimulating the differentiation of progenitor cells; stimulating the proliferation of differentiated cells; and supporting the growth and maintenance of differentiated cells, including the "redifferentiation" of transformed cells.

Details of how the morphogens useful in the method of this invention first were identified, as well as a description on how to make, use and test them for morphogenic activity are disclosed in USSN 667,274, filed March 11, 1991 and USSN 752,764, filed August 30, 1991. As disclosed therein, the morphogens may be purified from naturally-sourced material or recombinantly produced from procaryotic or eucaryotic host cells, using the genetic sequences disclosed therein. Alternatively, novel morphogenic sequences may be identified following the procedures disclosed therein.

[0052] Particularly useful proteins include those which comprise the naturally derived sequences disclosed in Table II. Other useful sequences include biosynthetic constructs such as those disclosed in U.S. Pat. 5,011,691 (e.g., COP-1, COP-3, COP-4, COP-5, COP-7, and COP-16).

[0053] Accordingly, the morphogens useful in the methods and compositions of this invention also may be described by morphogenically active proteins having amino acid sequences sharing 70% or, preferably, 80% homology (similarity) with any of the sequences described above, where "homology" is as defined herein above.

[0054] The morphogens useful in the method of this invention also can be described by any of the 6 generic sequences described herein (Generic Sequences 1, 2, 3, 4, 5 and 6). Generic sequences 1 and 2 also may include, at their N-terminus, the sequence

Cys Xaa Xaa Xaa Xaa (Seq. ID No. 15)

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Table II, set forth below, compares the amino acid sequences of the active regions of native proteins that have been identified as morphogens, including human OP-1 (hOP-1, Seq. ID Nos. 5 and 16-17), mouse OP-1 (mOP-1, Seq. ID Nos. 6 and 18-19), human and mouse OP-2 (Seq. ID Nos. 7, 8, and 20-23), CBMP2A (Seq. ID No. 9), CBMP2B (Seq. ID No. 10), BMP3 (Seq. ID No. 26), DPP (from Drosophila, Seq. ID No. 11), Vgl, (from Xenopus, Seq. ID No. 12), Vgr-1 (from mouse, Seq. ID No. 13), GDF-1 (from mouse, Seq. ID Nos. 14, 32 and 33), 60A protein (from Drosophila, Seq. ID Nos. 24 and 25), BMP5 (Seq. ID No. 27) and BMP6 (Seq. ID No. 28). The sequences are aligned essentially following the method of Needleman et al. (1970) J. Mol. Biol., 48:443-453, calculated using the Align Program (DNAstar, Inc.) In the table, three dots indicates that the amino acid in that position is the same as the amino acid in hOP-1. Three dashes indicates that no amino acid is present in that position, and are included for purposes of illustrating homologies. For example, amino acid residue 60 of CBMP-2A and CBMP-2B is "missing". Of course, both these amino acid sequences in this region comprise Asn-Ser (residues 58, 59), with CBMP-2A then comprising Lys and Ile, whereas CBMP-2B comprises Ser and Ile.

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# TABLE II

5	hOP-1	Cys	Lys	Lys	His	Glu	Leu	Tyr	Val	
	mOP-1		• • •	• • •	•••		• • •	•••	• • •	
	hOP-2	• • •	Arg	Arg	• • •	• • •	• • •	• • •	• • •	
10	mOP-2	•••	Arg	Arg	• • •	• • •	• • •	•••	• • •	
	DPP	•••	Arg	Arg	• • •	Ser	• • •	• • •	• • •	
•	Vgl	•••	•••	Lys	Arg	His	• • •	•••	• • •	
	Vgr-1	•••	• • •	• • •	• • •	Gly	• • •	• • •	• • •	
15	CBMP-2A	• • •	• • •	Arg	• • •	Pro	• • •	• • •	• • •	
	CBMP-2B	• • •	Arg	Arg	• • •	Ser	•••	•••	• • •	
	BMP3	•••	Ala	Arg	Arg	Tyr	•••	Lys	• • •	
20	GDF-1	• • •	Arg	Ala	Arg	Arg	•••	•••	• • •	
	A09		Gln	Met	Glu	Thr		•••		
	BMP5	• • •	• • •	• • •	•••	• • •	•••	• • •	• • •	
	BMP6	• • •	Arg	• • •	• • •	• • •	• • •	•••	• • •	
25		1				5				
20	1.00		<b>5</b> 1-	<b>4</b>	<b>A</b>		01	<b></b>	C1	4
30	hOP-1	Ser	Phe	Arg	Asp	Leu	Gly	Trp	Gln	Asp
30	mOP-1	•••	•••	•••	•••	•••	•••	•••	• • •	•••
30	mOP-1 hOP-2	•••	•••	Gln	•••	•••	•••		 Leu	•••
<i>30</i>	mOP-1 hOP-2 mOP-2	 Ser	•••	Gln	•••	•••	•••	•••	Leu Leu	•••
	mOP-1 hOP-2 mOP-2 DPP	Ser	•••	Gln  Ser	•••	  Val	•••	•••	Leu Leu Asp	•••
	mOP-1 hOP-2 mOP-2 DPP Vg1	Ser Asp	•••	Gln  Ser Lys	•••	  Val	•••	•••	Leu Leu Asp	  Asn
	mOP-1 hOP-2 mOP-2 DPP Vg1 Vgr-1	Ser Asp Glu	•••	Gln  Ser Lys Gln	•••	  Val Val	•••	•••	Leu Leu Asp	Asn
35	mOP-1 hOP-2 mOP-2 DPP Vg1 Vgr-1 CBMP-2A	Ser Asp Glu Asp	•••	Gln Ser Lys Gln Ser	•••	val	•••	•••	Leu Leu Asp 	  Asn
35	mOP-1 hOP-2 mOP-2 DPP Vg1 Vgr-1 CBMP-2A	Ser Asp Glu Asp		Gln Ser Lys Gln Ser Ser		val Val Val Val			Leu Leu Asp Asn Asn	 Asn
35	mOP-1 hOP-2 mOP-2 DPP Vg1 Vgr-1 CBMP-2A CBMP-2B BMP3	Ser Asp Glu Asp	•••	Gln Ser Lys Gln Ser Ser	•••	Val Val Val Val Val Val			Leu Leu Asp Asn Asn Ser	  Asn  Glu
35	mOP-1 hOP-2 mOP-2 DPP Vg1 Vgr-1 CBMP-2A CBMP-2B BMP3 GDF-1	Ser Asp Glu Asp Asp		Gln Ser Lys Gln Ser Ser Ala	   Glu	val Val Val Val			Leu Leu Asp Asn Asn Ser His	Asn Glu Arg
35 40	mOP-1 hOP-2 mOP-2 DPP Vg1 Vgr-1 CBMP-2A CBMP-2B BMP3 GDF-1 60A	Ser Asp Glu Asp Asp		Gln Ser Lys Gln Ser Ser Ala Lys	•••	Val Val Val Val Val Val			Leu Leu Asp Asn Asn Ser	  Asn  Glu
35 40	mOP-1 hOP-2 mOP-2 DPP Vg1 Vgr-1 CBMP-2A CBMP-2B BMP3 GDF-1 60A BMP5	Ser Asp Glu Asp Asp		Gln Ser Lys Gln Ser Ser Ala Lys	   Glu	Val Val Val Val Val Val			Leu Leu Asp Asn Asn Ser His	Asn Glu Arg
35 40	mOP-1 hOP-2 mOP-2 DPP Vg1 Vgr-1 CBMP-2A CBMP-2B BMP3 GDF-1 60A	Ser Asp Glu Asp Asp Asp		Gln Ser Lys Gln Ser Ser Ala Lys	   Glu	Val Val Val Val Val Val Val			Leu Leu Asp Asn Asn Ser His	 Asn  Glu Arg

	hOP-1	Trp	Ile	Ile	Ala	Pro	Glu	Gly	Tyr	Ala
	mOP-1	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •
5	hOP-2	• • •	Val	• • •	• • •	•••	Gln	• • •	• • •	Ser
	mOP-2	•••	Val	•••	• • •	• • •	Gln	•••	• • •	Ser
	DPP	•••	• • •	Val	• • •	• • •	Leu	• • •	• • •	Asp
10	♥gl	• • •	Val	• • •	• • •	• • •	Gln	•••	• • •	Het
	Vgr-1	• • •	• • •	•••	• • •	• • •	Lys	•••	• • •	•••
	CBMP-2A	• • •	•••	Val	• • •	• • •	Pro	• • •	• • •	His
	CBMP-2B	• • •	•••	Val	• • •	• • •	Pro	• • •	• • •	Gln
15	BMP3	•••	• • •	• • •	Ser		Lys	Ser	Phe	Asp
	GDF-1	•••	Val	•••	• • •	•••	Arg	•••	Phe	Leu
	60A	•••	• • •	• • •	• • •	• • •	• • •	• • •	• • •	Gly
20	BMP5	• • •	• • •	• • •	• • •	•••	•••	• • •		•••
	BMP6						Lys			
				20			•		25	
25										
	hOP-1	Ala	Tyr	Tyr	Cys	Glu	Gly	Glu	Cys	Ala
	mOP-1	•••	• • •	•••	•••	• • •	•••	• • •	• • •	• • •
30	hOP-2	•••	• • •	•••	•••	• • •	•••	• • •	•••	Ser
	mOP-2	•••	• • •	•••	• • •	•••	• • •	•••		•••
	DPP	•••	• • •	• • •		His	• • •	Lys		Pro
35	Vgl	• • •	Asn	• • •	• • •	Tyr	• • •	• • •		Pro
33	Vgr-1	•••	Asn	• • •	• • •	Asp	• • •	• • •	• • •	Ser
	CBMP-2A	•••	Phe	•••	• • •	His	• • •	Glu		Pro
	CBMP-2B	• • •	Phe	• • •	• • •	His	• • •	Asp	• • •	Pro
40	BMP3		• • •	• • •	• • •	Ser	•••	Ala	• • •	Gln
	GDF-1	•••	Asn	• • •	• • •	Gln	• • •	Gln		• • •
	60A	• • •	Phe	• • •	• • •	Ser	•••	• • •	• • •	Asn
45	BMP5	• • •	Phe	•••	• • •	Asp	• • •	• • •	• • •	Ser
₩	BMP6	•••	Asn	• • •	• • •	Asp		• • •	• • •	Ser
					30					35
50	h0P-1	Phe	Pro	Leu	Asn	Ser	Tyr	Met	Asn	Ala
	mOP-1	• • •	•••	• • •	•••	•••	•••	•••	• • •	

	hOP-2	• • •	• • •	• • •	Asp	• • •	Cys	• • •	• • •	• • •
_	mOP-2	• • •	• • •	• • •	Asp	• • •	Cys	•••	• • •	• • •
5	DPP	• • •	• • •	•••	Ala	Asp	His	Phe	•••	Ser
	Vgl	Tyr	•••	•••	Thr	Glu	Ile	Leu	•••	Gly
	Vgr-1	• • •	• • •	•••	• • •	Ala	His	•••	• • •	• • •
10	CBMP-2A	• • •	• • •	•••	Ala	Asp	His	Leu	• • •	Ser
	CBMP-2B	• • •	• • •	•••	Ala	Asp	His	Leu	• • •	Ser
	GDF-1	Leu	• • •	Val	Ala	Leu	Ser	Gly	Ser**	• • •
4.5	вир3	• • •	• • •	Met	Pro	Lys	Ser	Leu	Lys	Pro
15	60A	• • •	• • •	•••	•••	Ala	His	• • •	• • •	• • •
	BMP5	• • •	• • •	•••	• • •	Ala	His	Net	•••	• • •
	BMP6	• • •	• • •	•••	• • •	Ala	His	Het	•••	• • •
20						40				
				•••	.,	~1 .		<b>63</b>	mt	•
	h0P-1	Thr	Asn	His	Ala	Ile	Val	Gln	Thr	Leu
25	mOP-1	• • •	•••	•••	• • •	• • •	•••	•••	•••	• • •
	hOP-2	• • •	• • •	•••	•••	• • •	Leu	•••	Ser	• • •
	mOP-2	• • •	• • •	•••	• • •	•••	Leu	•••	Ser	•••
	DPP	• • •	• • •	•••	• • •	Val	• • •	• • •	•••	• • •
30	Vgl	Ser	• • •	• • •	•••	• • •	Leu	•••	•••	• • •
	Vgr-1	• • •	• • •	•••	• • •	• • •	• • •	•••	• • •	• • •
	CBMP-2A	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •	• • •
35	CBMP-2B	• • •	• • •	•••	• • •	• • •	• • •	•••	• • •	• • •
	BMP3	Ser	• • •	• • •	• • •	Thr	Ile	•••	Ser	Ile
	GDF-1	Leu	• • •	•••	• • •	Val	Leu	Arg	Ala	• • •
	60A	• • •	• • •	• • •	• • •	• • •	• • •	• • •	•••	• • •
40	BMP5	• • •	• • •	•••	• • •	• • •	• • •	• • •	•••	• • •
	BMP6	• • •	•••	• • •	•••	• • •	•••	•••	•••	• • •
		45					50			
45										
	h0P-1	Val	His	Phe	Ile	Asn	Pro	Glu	Thr	Val
	mOP-1	• • •	• • •	• • •	• • •		• • •	Asp		•••
50	hOP-2	• • •	His	Leu	Met	Lys		Asn	Ala	
	mOP-2	• • •	His	Leu	Met	Lys		Asp	Val	•••

	DPP	• • •	Asn	Asn	Asn	• • •		Gly	Lys	• • •
	Vgl	•••	•••	Ser		Glu	• '• •	•••	Asp	Ile
5	Vgr-1	•••	• • •	Val	Het	•••	• • •	•••	Tyr	•••
	CBMP-2A	•••	Asn	Ser	Val	•••	Ser		Lys	Ile
	CBMP-2B	•••	Asn	Ser	Val	• • •	Ser		Ser	Ile
10	· вирз	• • •	Arg	Alax	* Gly	Val	Val	Pro	Gly	Ile
,,,	GDF-1	Het	•••	Ala	Ala	Ala	•••	Gly	Ala	Ala
	60A	• • •	• • •	Leu	Leu	Glu	•••	Lys	Lys	•••
	BMP5	•••	•••	Leu	Net	Phe	• • •	Asp	His	•••
15	BMP6	•••	•••	Leu	Met	• • •	•••	•••	Tyr	• • •
			55					60	-7	
20										
	h0P-1	Pro	Lys	Pro	Cys	Cys	Ala	Pro	Thr	Gln
	mOP-1	• • •	• • •	• • •	•••	•••	•••	• • •	•••	•••
	hOP-2	• • •		Ala	• • •	•••	• • •	•••	•••	Lys
25	mOP-2	• • •	• • •	Ala		•••	• • •			Lys
	DPP	•••	• • •	Ala	• • •		Val	• • •	• • •	•••
	Vgl	•••	Leu	• • •	•••		Val	• • •	• • •	Lys
30	Vgr-1	• • •	•••	• • •		• • •		• • •	•••	Lys
	CBMP-2A	• • •	• • •	Ala	•••	• • •	Val	•••	• • •	Glu
	CBMP-2B	•••	• • •	Ala	• • •	• • •	Val	•••	•••	Glu
35	BMP3	• • •	Glu	• • •	• • •	• • •	Val	• • •	Glu	Lys
00	GDF-1	Asp	Leu	• • •	• • •	• • •	Val	• • •	Ala	Arg
	60A	• • •	• • •	•••	• • •	• • •	• • •	• • •	• • •	Arg
	BMP5	• • •	•••	• • •	• • •		• • •	•••		Lys
40	BMP6	• • •	•••	• • •	• • •	• • •	• • •	• • •	• • •	Lys
				65					70	·
45	hOP-1	Leu	Asn	Ala	Ile	Ser	Val	Leu	Tyr	Phe
	mOP-1	• • •	• • •	• • •	• • •	• • •	• • •	• • •	•••	•••
	hOP-2	• • •	Ser	• • •	Thr	• • •	• • •	• • •	•••	Tyr
50	mOP-2	• • •	Ser	•••	Thr	• • •	• • •	• • •	• • •	Tyr
50	Vgl	Het	Ser	Pro	• • •	•••	Met	• • •	Phe	Tyr
	Vgr-1	Val	•••	•••	•••	• • •	•••	•••	•••	•••

										_
	DPP	•••	Asp	Ser	Val	Ala	Net	• • •	• • •	Leu
	CBMP-2A	• • •	Ser	• • •	• • •	•••	Ket	• • •	•••	Leu
5	CBMP-2B	• • •	Ser	• • •	•••	• • •	Met	•••	•••	Leu
	BMP3	Het	Ser	Ser	Leu	• • •	Ile	•••	Phe	Tyr
	GDF-1	•••	Ser	Pro	• • •	• • •	• • •	• • •	Phe	•••
10	60A	•••	Gly	•••	Leu	Pro	• • •	• • •	• • •	His
	BMP5	• • •	• • •	• • •	•••	• • •	•••	• • •	• • •	•••
	BMP6	• • •	• • •	• • •	•••	• • •	• • •	• • •	• • •	•••
					<b>7</b> 5					80
15										
	hOP-1	Asp	Asp	Ser	Ser	Asn	Val	Ile	Leu	Lys
	mOP-1		• • •	•••	•••		• • •	• • •	• • •	• • •
20	hOP-2	•••	Ser	• • •	Asn	• • •	•••		• • •	Arg
	mOP-2		Ser	•••	Asn			•••	• • •	Arg
	DPP	Asn	• • •	Gln		Thr	•••	Val	• • •	• • •
	Vgl	• • •	Asn	Asn	Asp	•••	• • •	Val	• • •	Arg
25	Vgr-1	•••	• • •	Asn	•••	• • •	•••	• • •	• • •	•••
	CBMP-2A	•••	Glu	Asn	Glu	Lys	• • •	Val	• • •	•••
	CBMP-2B	•••	Glu	Tyr	Asp	Lys	• • •	Val	• • •	•••
30	BMP3		Glu	Asn	Lys	• • •	•••	Val	• • •	•••
	GDF-1		Asn		Asp		• • •	Val	• • •	Arg
	60A	Leu	Asn	Asp	Glu		• • •	Asn	• • •	•••
35	BMP5	• • •		•••	•••		• • •	• • •	• • •	•••
00	BMP6		• • •	Asn			• • •	•••	• • •	•••
						85				
40										
	hOP-1	Lys	Tyr	Arg	Asn	Met	Val	Val	Arg	
	mOP-1	•••	• • •	•••	•••	• • •	• • •	• • •	• • •	
45	hOP-2		His		• • •	• • •	• • •	•••	Lys	
	mOP-2	• • •	His		• • •	• • •	• • •	• • •	Lys	
	DPP	Asn	•••	Gln	Glu		Thr		Val	
	Vgl	His	• • •	Glu	•••		Ala	• • •	Asp	
50	Vgr-1	•••	• • •		• • •	• • •	•••	•••	• • •	
	CBHP-2A	Asn	• • •	Gln	Asp	•••	• • •	•••	Glu	

	CBMP-2B	Asn	• • •	Gln	Glu	• • •	• • •	• • •	Glu
•	вирз	Val	• • •	Pro	• • •	•••	Thr	• • •	Glu
5	GDF-1	Gln	•••	Glu	Asp	•••	• • •	• • •	Asp
	60A	•••	• • •	•••	•••	• • •	Ile	• • •	Lys
	BMP5	•••	• • •	• • •	• • •	• • •	• • •	•••	• • •
10	BMP6	•••	•••	•••	Trp	• • •	• • •	• • •	• • •
		90					95		
15					_				
	hOP-1	Ala	Cys	Gly	Cys	His			
	mOP-1	•••	• • •	• • •	• • •	•••			
	hOP-2	• • •	• • •	• • •	• • •	• • •			
20	mOP-2	•••	• • •	• • •	• • •	• • •			
	DPP	Gly	• • •	• • •	•••	Arg			
	Vgl	Glu	• • •	• • •	•••	Arg			
25	Vgr-1	•••	• • •	• • •	• • •	• • •			
25	CBMP-2A	Gly	• • •	• • •	•••	Arg			
	CBHP-2B	Gly	• • •	• • •	•••	Arg			
	BMP3	Ser	• • •	Ala	•••	Arg			
30	GDF-1	Glu	• • •	•••	•••	Arg			
	60A	Ser	• • •	• • •	• • •	•••			
	BMP5	Ser	• • •	• • •	•••	• • •			
35	BMP6	•••	• • •	•••	•••	• • •			
				100					
	++Retueen	residues	56 at	nd 57	of BMP3	is a	Val	residue:	

\*\*Between residues 56 and 57 of BMP3 is a Val residue; between residues 43 and 44 of GDF-1 lies the amino acid sequence Gly-Gly-Pro-Pro.

<sup>[0056]</sup> As is apparent from the foregoing amino acid sequence comparisons, significant amino acid changes can be made within the generic sequences while retaining the morphogenic activity. For example, while the GDF-1 protein sequence depicted in Table II shares only about 50% amino acid identity with the hOP1 sequence described therein, the GDF-1 sequence shares greater than 70% amino acid sequence homology (or "similarity") with the hOP1 sequence, where "homology" or "similarity" includes allowed conservative amino acid changes within the sequence as defined by Dayoff, et al., Atlas of Protein Sequence and Structure vol.5, supp.3, pp.345-362, (M.O. Dayoff, ed., Nat'l BioMed. Res. Fd'n, Washington D.C. 1979.)

<sup>[0057]</sup> The currently most preferred protein sequences useful as morphogens in this invention include those having greater than 60% identity, preferably greater than 65% identity, with the amino acid sequence defining the conserved six cysteine skeleton of hOP1 (e.g., residues 43-139 of Seq. ID No. 5). These most preferred sequences include both allelic and species variants of the OP-1 and OP-2 proteins, including the Drosophila 60A protein. Accordingly, in still another preferred aspect, the invention includes morphogens comprising species of polypeptide chains having the generic amino acid sequence referred to herein as "OPX", which defines the seven cysteine skeleton and accommodates the identities between the various identified mous and human OP1 and OP2 proteins. OPX is pr s nted in Seq.

ID No. 29. As described therein, each Xaa at a given position independently is selected from the residues occurring at the corresponding position in the C-terminal sequence of mouse or human OP1 or OP2 (see Seq. ID Nos. 5-8 and/or Seq. ID Nos. 16-23).

#### Formulations and Methods for Administering Therapeutic Agents

The morphogens may be provided to an individual by any suitable means, preferably directly (e.g., locally, as by injection or topical administration to a tissue locus) or systemically (e.g., parenterally or orally). Where the morphogen is to be provided parenterally, such as by intravenous, subcutaneous, intramuscular, intraorbital, ophthalmic, intraventricular, intracranial, intracapsular, intraspinal, intracisternal, intraperitoneal, buccal, rectal, vaginal, intranasal or by aerosol administration, the morphogen preferably comprises part of an aqueous solution. The solution is physiologically acceptable so that in addition to delivery of the desired morphogen to the patient, the solution does not otherwise adversely affect the patient's electrolyte and volume balance. The aqueous medium for the morphogen thus may comprise normal physiologic saline (9.85% NaCl, 0.15M), pH 7-7.4. The aqueous solution containing the morphogen can be made, for example, by dissolving the protein in 50% ethanol containing acetonitrile in 0.1% trifluoroacetic acid (TFA) or 0.1% HCl, or equivalent solvents. One volume of the resultant solution then is added, for example, to ten volumes of phosphate buffered saline (PBS), which further may include 0.1-0.2% human serum albumin (HSA). The resultant solution preferably is vortexed extensively. If desired, a given morphogen may be made more soluble by association with a suitable molecule. For example, association of the mature dimer with the pro domain of the morphogen keeps the morphogen soluble in physiological buffers. In fact, the endogenous protein is thought to be transported in this form. Another molecule capable of enhancing solubility and particularly useful for oral administrations, is casein. For example, addition of 0.2% casein increases solubility of the mature active form of OP-1 by 80%. Other components found in milk and/or various serum proteins also may be useful.

[0059] Useful solutions for parenteral administration may be prepared by any of the methods well known in the pharmaceutical art, described, for example, in Remington's Pharmaceutical Sciences (Gennaro, A., ed.), Mack Pub., 1990. Formulations may include, for example, polyalkylene glycols such as polyethylene glycol, oils of vegetable origin, hydrogenated naphthalenes, and the like. Formulations for direct administration, in particular, may include glycerol and other compositions of high viscosity to help maintain the morphogen at the desired locus. Biocompatible, preferably bioresorbable, polymers, including, for example, hyaluronic acid, collagen, tricalcium phosphate, polybutyrate, lactide and glycolide polymers, and lactide/glycolide copolymers, may be useful excipients to control the release of the morphogen in vivo. Other potentially useful parenteral delivery systems for these morphogens include ethylene-vinyl acetate copolymer particles, osmotic pumps, implantable infusion systems, and liposomes. Formulations for inhalation administration contain as excipients, for example, lactose, or may be aqueous solutions containing, for example, polyoxyethylene-9-lauryl ether, glycocholate and deoxycholate, or oily solutions for administration in the form of nasal drops, or as a gel to be applied intranasally. Formulations for parenteral administration may also include glycocholate for buccal administration, methoxysalicylate for rectal administration, or cutric acid for vaginal administration.

[0060] Suppositories for rectal administration also may be prepared by mixing the morphogen or morphogen-stimulating agent with a non-irritating excipient such as cocoa butter or other compositions which are solid at room temperature and liquid at body temperatures.

[0061] Formulations for topical administration to the skin surface may be prepared by dispersing the morphogen or morphogen-stimulating agent with a dermally acceptable carrier such as a lotion, cream, ointment or soap. Particularly useful are carriers capable of forming a film or layer over the skin to localize application and inhibit removal. For topical administration to internal tissue surfaces, the morphogen may be dispersed in a liquid tissue adhesive or other substance known to enhance adsorption to a tissue surface. For example, hydroxypropylcellulose or fibrinogen/thrombin solutions may be used to advantage. Alternatively, tissue-coating solutions, such as pectin-containing formulations, may be used.

[0062] Alternatively, the morphogens described herein may be administered orally. Oral administration of proteins as therapeutics generally is not practiced as most proteins are readily degraded by digestive enzymes and acids in the mammalian digestive system before they can be absorbed into the bloodstream. However, the morphogens described herein typically are acid stable and protease-resistant (see, for example, U.S. Pat.No. 4,968,590.) In addition, at least one morphogen, OP-1, has been identified in mammary gland extract, colostrum and 57-day milk. Moreover, the OP-1 purified from mammary gland extract is morphogenically active. Specifically, this protein induces endochondral bone formation in mammals when implanted subcutaneously in association with a suitable matrix material, using a standard in vivo bone assay, such as is disclosed in U.S. Pat.No. 4,968,590. Moreover, the morphogen also is detected in the bloodstream. Finally, soluble form morphogen, e.g., mature morphogen associated with the pro domain, is morphogenically active. Thes findings indicate that oral and parenteral administration are viable means for administering morphogens to an individual. In addition, while the mature forms of certain morphogens described herein typically are sparingly soluble, the morphogen form found in milk (and mammary gland extract and colostrum) is readily soluble,

probably by association of the mature, morphogenically active form with part or all of the pro domain of the intact sequence and/or by association with one or more milk components. Accordingly, the compounds provided herein also may be associated with molecules capable of enhancing their solubility in vitro or in vivo.

[0063] Where the morphogen or morphogen-stimulating agent comprises part of a tissue or organ preservation solution, any commercially available preservation solution may be used to advantag. For exampl, useful solutions known in the art include Collins solution, Wisconsin solution, Belzer solution, Eurocollins solution and lactated Ringer's solution. Generally, an organ preservation solution usually possesses one or more of the following properties: (a) an osmotic pressure substantially equal to that of the inside of a mammalian cell, (solutions typically are hyperosmolar and have K+ and/or Mg++ ions present in an amount sufficient to produce an osmotic pressure slightly higher than the inside of a mammalian cell; (b) the solution typically is capable of maintaining substantially normal ATP levels in the cells; and (c) the solution usually allows optimum maintenance of glucose metabolism in the cells. Organ preservation solutions also may contain anticoagulants, energy sources such as glucose, fructose and other sugars, metabolites, heavy metal chelators, glycerol and other materials of high viscosity to enhance survival at low temperatures, free oxygen radical inhibiting agents and a pH indicator. A detailed description of preservation solutions and useful components may be found, for example, in US Patent No. 5,002,965.

[0064] The compounds provided herein also may be associated with molecules capable of targeting the morphogen or morphogen-stimulating agent to the desired tissue. For example, an antibody, antibody fragment, or other binding protein that interacts specifically with a surface molecule on cells of the desired tissue, may be used. Useful targeting molecules may be designed, for example, using the single chain binding site technology disclosed, for example, in U.S. Pat. No. 5,091,513.

[0065] As described above, the morphogens provided herein share significant sequence homology in the C-terminal active domains. By contrast, the sequences typically diverge significantly in the sequences which define the prodomain. Accordingly, the prodomain is thought to be morphogen-specific. As described above, it is also known that the various morphogens identified to date are differentially expressed in the different tissues. Accordingly, without being limited to any given theory, it is likely that, under natural conditions in the body, selected morphogens typically act on a given tissue. Accordingly, part or all of the prodomains which have been identified associated with the active form of the morphogen in solution, may serve as targeting molecules for the morphogens described herein. For example, the prodomains may interact specifically with one or more molecules at the target tissue to direct the morphogen associated with the prodomain to that tissue. Accordingly, another useful targeting molecule for targeting morphogen to a tissue of interest is part or all of a morphogen prodomain. For example, part or all of the prodomain of GDF-1 may be used to target a morphogen to nerve tissue. Alternatively, part or all of the prodomain of OP-1 or CBMP2 may be used to target a morphogen to bone tissue, both of which proteins are found naturally associated with bone tissue.

[0066] The morphogens described herein are useful for providing neuroprotective effects to alleviate neural pathway damage associated with the body's immune/inflammatory response to an initial injury to nerve tissue. As used herein, a "neural pathway" describes a nerve circuit for the passage of electric signals from a source to a target cell site and includes both the central nervous system (CNS) and peripheral nervous system (PNS). The pathway includes the neurons through which the electric impulse is transported, including groups of interconnecting neurons, the nerve fibers formed by bundled neuronal axons, and the glial cells surrounding and associated with the neurons. An inflammatory response to nerve tissue injury may follow trauma to nerve tissue, caused, for example, by an autoimmune (including autoantibody) dysfunction, neoplastic lesion, infection, chemical or mechanical trauma, or other disease. An exemplary nerve-related inflammatory disease is multiple sclerosis. Neural pathway damage also can result from a reduction or interruption, e.g., occlusion, of a neural blood supply, as in an embolic stroke, (e.g., ischemia or hypoxia-induced injury), or by other trauma to the nerve or surrounding material. In addition, at least part of the damage associated with a number of primary brain tumors also appears to be immunologically related. Application of the morphogen directly to the cells to be treated, or providing the morphogen to the mammal systemically, for example, intravenously or indirectly by oral administration, may be used to alleviate and/or inhibit the immunologically related response to a neural injury. Alternatively, administration of an agent capable of stimulating morphogen expression and/or secretion in vivo, preferably at the site of injury, also may be used. Where the injury is to be induced, as during surgery or other aggressive clinical treatment, the morphogen or agent may be provided prior to induction of the injury to provide a neuroprotective effect to the nerve tissue at risk.

[0067] Where the morphogen is intended for use as a therapeutic to alleviate tissue damage associated with an immune/inflammatory condition of the CNS, an additional problem must be addressed: overcoming the so-called "blood-brain barrier", the brain capillary wall structure that effectively screens out all but selected categories of molecules present in the blood, preventing their passage into the brain. The blood-brain barrier may be bypassed effectively by direct infusion of the morphogen or morphogen-stimulating agent into the brain. Alternatively, the morphogen or morphogen-stimulating agent may be modified to enhance its transport across the blood-brain barrier. For example, truncated forms of the morphogen or a morphogen-stimulating agent may be most successful. Alternatively, the morphogen or morphogen-stimulating agent may be modified to render it more lipophilic, or it may be conjugated to another mole-

cule which is naturally transported across the barrier, using standard means known to those skilled in the art, as, for example, described in Pardridge, <u>Endocrine Reviews 7</u>:314-330 (1986) and U.S. Pat. No. 4,801,575.

[0068] Finally, the morphogens or morphogen-stimulating agents provided herein may be administered alone or in combination with ther molecules known to be beneficial in the treatment compositions and methods described herein, including, but not limited to anticoagulants, free oxygen radical inhibiting agents, salicylic acid, vitamin D, and other anti-inflammatory agents. Psoriais treatments also may include ultra-violet light treatment, zinc oxide and retinoids.

[0069] The compounds provided herein can be formulated into pharmaceutical compositions by admixture with pharmaceutically acceptable nontoxic excipients and carriers. As noted above, such compositions may be prepared for parenteral administration, particularly in the form of liquid solutions or suspensions; for oral administration, particularly in the form of tablets or capsules; or intranasally, particularly in the form of powders, nasal drops, or aerosols.

[0070] The compositions can be formulated for parenteral or oral administration to humans or other mammals in therapeutically effective amounts, e.g., amounts which provide appropriate concentrations for a time sufficient to alleivate the tissue destructive effects associated with the inflammatory response, including protecting tissue in anticipation of tissue damage.

[0071] As will be appreciated by those skilled in the art, the concentration of the compounds described in a therapeutic composition will vary depending upon a number of factors, including the dosage of the drug to be administered, the chemical characteristics (e.g., hydrophobicity) of the compounds employed, and the route of administration. The preferred dosage of drug to be administered also is likely to depend on such variables as the type and extent of progression of the tissue damage, the overall health status of the particular patient, the relative biological efficacy of the compound selected, the formulation of the compound excipients, and its route of administration. In general terms, the compounds of this invention may be provided in an aqueous physiological buffer solution containing about 0.001% to 10% w/v compound for parenteral administration. Typical dose ranges are from about 10 ng/kg to about 1 g/kg of body weight per day; a preferred dose range is from about 0.1 µg/kg to 100 mg/kg of body weight per day. Optimally, the morphogen dosage given is between 0.1-100 µg of protein per kilogram weight of the patient. No obvious morphogen induced pathological lesions are induced when mature morphogen (e.g., OP-1, 20 µg) is administered daily to normal growing rats for 21 consecutive days. Moreover, 10 µg systemic injections of morphogen (e.g., OP-1) injected daily for 10 days into normal newborn mice does not produce any gross abnormalities.

[0072] In administering morphogens systemically in the methods of the present invention, preferably a large volume loading dose is used at the start of the treatment. The treatment then is continued with a maintenance dose. Further administration then can be determined by monitoring at intervals the levels of the morphogen in the blood.

[0073] Where tissue injury is induced deliberately as part of, for example, a surgical procedure, the morphogen preferably is provided just prior to, or concomitant with induction of the trauma. Preferably, the morphogen is administered prophylactically in a surgical setting.

[0074] Alternatively, an effective amount of an agent capable of stimulating endogenous morphogen levels may be administered by any of the routes described above. For example, an agent capable of stimulating morphogen production and/or secretion from cells of affected tissue and/or transplant tissue may be provided to a mammal, e.g., by direct administration of the agent to the tissue to be treated. A method for identifying and testing agents capable of modulating the levels of endogenous morphogens in a given tissue is described generally herein in Example 15, and in detail in copending USSN 752,859, filed August 30, 1991. Briefly, candidate compounds can be identified and tested by incubating the compound in vitro with a test tissue or cells thereof, for a time sufficient to allow the compound to affect the production, i.e., the expression and/or secretion, of a morphogen produced by the cells of that tissue.

[0075] For purposes of the present invention, the above-described morphogens effective in alleviating tissue damage associated with ischemic-reperfusion injury (or the agents that stimulate them, referred to collectively herein as "therapeutic agent") are administered prior to or during the restoration of oxygen (e.g., restoration of blood flow, reperfusion.) Where treatment is to follow an existing injury, the therapeutic agent preferably is administered as an intravenous infusion provided acutely after the hypoxic or ischemic condition occurs. For example, the therapeutic agent can be administered by intravenous infusion immediately after a cerebral infarction, a myocardial infarction, asphyxia, or a cardiopulmonary arrest. Where ischemia or hypoxia injury is deliberately and/or unavoidably induced as part of, for example, a surgical procedure where circulation to an organ or organ system is deliberately and/or transiently interrupted, e.g., in carotid enterectomy, coronary artery bypass, grafting, organ transplanting, fibrinolytic therapy, etc., the therapeutic agent preferably is provided just prior to, or concomitant with, reduction of oxygen to the tissue. Preferably, the morphogen is administered prophylactically in a surgical setting.

[0076] Similarly, where hyperoxia-induced injury already has occurred, the morphogen is administered upon diagnosis. Where hyperoxia injury may be induced as, for example, during treatment of prematurely newborn babies, or patients suffering from pulmonary diseases such as emphysema, the therapeutic agent preferably is administered prior to administration of oxygen e.g., prophylactically.

## III. Examples

#### Example 1. Identification of Morphogen-Expressing Tissue

[0077] Determining the tissue distribution of morphogens may be used to identify different morphogens expressed in a given tissue, as well as to identify new, related morphogens. Tissue distribution also may be used to identify useful morphogen-producing tissue for use in screening and identifying candidate morphogen-stimulating agents. The morphogens (or their mRNA transcripts) readily are identified in different tissues using standard methodologies and minor modifications thereof in tissues where expression may be low. For example, protein distribution may be determined using standard Western blot analysis or immunofluorescent techniques, and antibodies specific to the morphogen or morphogens of interest. Similarly, the distribution of morphogen transcripts may be determined using standard Northern hybridization protocols and transcript-specific probes.

[0078] Any probe capable of hybridizing specifically to a transcript, and distinguishing the transcript of interest from other, related transcripts may be used. Because the morphogens described herein share such high sequence homology in their active, C-terminal domains, the tissue distribution of a specific morphogen transcript may best be determined using a probe specific for the pro region of the immature protein and/or the N-terminal region of the mature protein. Another useful sequence is the 3' non-coding region flanking and immediately following the stop codon. These portions of the sequence vary substantially among the morphogens of this invention, and accordingly, are specific for each protein. For example, a particularly useful Vgr-1-specific probe sequence is the Pvull-SacI fragment, a 265 bp fragment encoding both a portion of the untranslated pro region and the N-terminus of the mature sequence (see Lyons et al. (1989) PNAS 86:4554-4558 for a description of the cDNA sequence). Similarly, particularly useful mOP-1-specific probe sequences are the BstX1-BglI fragment, a 0.68 Kb sequence that covers approximately two-thirds of the mOP-1 pro region; a Stul-Stul fragment, a 0.2 Kb sequence immediately upstream of the 7-cysteine domain; and the Ear1-Pst1 fragment, an 0.3 Kb fragment containing a portion of the 3'untranslated sequence (See Seq. ID No. 18, where the pro region is defined essentially by residues 30-291.) Similar approaches may be used, for example, with hOP-1 (Seq. ID No. 16) or human or mouse OP-2 (Seq. ID Nos. 20 and 22.)

[0079] Using these morphogen-specific probes, which may be synthetically engineered or obtained from cloned sequences, morphogen transcripts can be identified in mammalian tissue, using standard methodologies well known to those having ordinary skill in the art. Briefly, total RNA is prepared from various adult murine tissues (e.g., liver, kidney, testis, heart, brain, thymus and stomach) by a standard methodology such as by the method of Chomczyaski et al. ((1987) Anal. Biochem 162:156-159) and described below. Poly (A)+ RNA is prepared by using oligo (dT)-cellulose chromatography (e.g., Type 7, from Pharmacia LKB Biotechnology, Inc.). Poly (A)+ RNA (generally 15 µg) from each tissue is fractionated on a 1% agarose/formaldehyde gel and transferred onto a Nytran membrane (Schleicher & Schuell). Following the transfer, the membrane is baked at 80°C and the RNA is cross-linked under UV light (generally 30 seconds at 1 mW/cm²). Prior to hybridization, the appropriate probe is denatured by heating. The hybridization is carried out in a lucite cylinder rotating in a roller bottle apparatus at approximately 1 rev/min for approximately 15 hours at 37°C using a hybridization mix of 40% formamide, 5 x Denhardts, 5 x SSPE, and 0.1% SDS. Following hybridization, the non-specific counts are washed off the filters in 0.1 x SSPE, 0.1% SDS at 50°C.

[0080] Examples demonstrating the tissue distribution of various morphogens, including Vgr-1, OP-1, BMP2, BMP3, BMP4, BMP5, GDF-1, and OP-2 in developing and adult tissue are disclosed in co-pending USSN 752,764, and in Ozkaynak, et al., (1991) Biochem. Biophys. Res. Commn. 179:116-123, and Ozkaynak, et al. (1992) (JBC, in press). Using the general probing methodology described herein, northern blot hybridizations using probes specific for these morphogens to probe brain, spleen, lung, heart, liver and kidney tissue indicate that kidney-related tissue appears to be the primary expression source for OP-1, with brain, heart and lung tissues being secondary sources. OP-1 mRNA also was identified in salivary glands, specifically rat parotid glands, using this probing methodology. Lung tissue appears to be the primary tissue expression source for Vgr-1, BMP5, BMP4 and BMP3. Lower levels of Vgr-1 also are seen in kidney and heart tissue, while the liver appears to be a secondary expression source for BMP5, and the spleen appears to be a secondary expression source for BMP4. GDF-1 appears to be expressed primarily in brain tissue. To date, OP-2 appears to be expressed primarily in early embryonic tissue. Specifically, northern blots of murine embryos and 6-day post-natal animals shows abundant OP2 expression in 8-day embryos. Expression is reduced significantly in 17-day embryos and is not detected in post-natal animals.

# Example 2. Active Morphogens in Body Fluids

[0081] OP-1 expression has been identified in saliva (specifically, the rat parotid gland, see Example 1), human blood serum, and various milk forms, including mammary gland extract, colostrum, and 57-day bovine milk. Moreover, and as described in USSN 923,780, the body fluid-extracted protein is morphogenically active. The discovery that the morphogen naturally is present in milk and saliva, together with the known observation that mature, activ OP-1 is acid-

stable and protease-resistant, indicate that oral administration is a useful route for therapeutic administration of morphogen to a mammal. Oral administration typically is the preferred mode of delivery for extended or prophylactic therapies. In addition, the identification of morphogen in all milk forms, including colostrum, suggests that the protein may play a significant role in tissue development, including skeletal development, of juveniles.

## 2.1 Morphogen Detection in Milk

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[0082] OP-1 was partially purified from rat mammary gland extract and bovine colostrum and 57 day milk by passing these fluids over a series of chromatography columns: (e.g., cation-exchange, affinity and reverse phase). At each step the eluant was collected in fractions and these were tested for the presence of OP-1 by standard immunoblot. Immunoreactive fractions then were combined and purified further. The final, partially purified product then was examined for the presence of OP-1 by Western blot analysis using OP-1-specific antisera, and tested for in vivo and in vitro activity.

[0083] OP-1 purified from the different milk sources were characterized by Western blotting using antibodies raised against OP-1 and BMP2. Antibodies were prepared using standard immunology protocols well known in the art, and as described generally in Example 15, below, using full-length <u>E. coli</u>-produced OP-1 and BMP2 as the immunogens. In all cases, the purified OP-1 reacted only with the anti-OP-1 antibody, and not with anti-BMP2 antibody.

[0084] The morphogenic activity of OP-1 purified from mammary gland extract was evaluated in vivo essentially following the rat model assay described in U.S. Pat. No. 4,968,590. Briefly, a sample was prepared from each OP-1 immunoreactive fraction of the mammary gland extract-derived OP-1 final product by lyophilizing a portion (33%) of the fraction and resuspending the protein in 220µl of 50% acetonitrile/0.1% TFA. After vortexing, 25 mg of collagen matrix was added. The samples were lyophilized overnight, and implanted in Long Evans rats (Charles River Laboratories, Wilmington, MA, 28-35 days old). Each fraction was implanted in duplicate. For details of the collagen matrix implantation procedure, see, for example, U.S. Pat. No. 4,968,590. After 12 days, the implants were removed and evaluated for new bone formation by histological observation as described in U.S. Patent No. 4,968,590. In all cases, the immunoreactive fractions were osteogenically active.

#### 2.2 Morphogen Detection in Serum

[0085] Morphogen may be detected in serum using morphogen-specific antibodies. The assay may be performed using any standard immunoassay, such as Western blot (immunoblot) and the like. Preferably, the assay is performed using an affinity column to which the morphogen-specific antibody is bound and through which the sample serum then is poured, to selectively extract the morphogen of interest. The morphogen then is eluted. A suitable elution buffer may be determined empirically by determining appropriate binding and elution conditions first with a control (e.g., purified, recombinantly-produced morphogen.) Fractions then are tested for the presence of the morphogen by standard immunoblot, and the results confirmed by N-terminal sequencing. Preferably, the affinity column is prepared using monoclonal antibodies. Morphogen concentrations in serum or other fluid samples then may be determined using standard protein quantification techniques, including by spectrophotometric absorbance or by quantitation of conjugated antibody.

[0086] Presented below is a sample protocol for identifying OP-1 in serum. Following this general methodology other morphogens may be detected in body fluids, including serum. The identification of morphogen in serum further indicates that systemic administration is a suitable means for providing therapeutic concentrations of a morphogen to an individual, and that morphogens likely behave systemically as endocrine-like factors. Finally, using this protocol, fluctuations in endogenous morphogen levels can be detected, and these altered levels may be used as an indicator of tissue dysfunction. Alternatively, fluctuations in morphogen levels may be assessed by monitoring morphogen transcription levels, either by standard northern blot analysis as described in Example 1, or by in situ hybridization, using a labelled probe capable of hybridizing specifically to morphogen mRNA, and standard RNA hybridization protocols well described in the art and described generally in Example 1.

[0087] OP-1 was detected in human serum using the following assay. A monoclonal antibody raised against mammalian, recombinantly produced OP-1 using standard immunology techniques well described in the art and described generally in Example 15, was immobilized by passing the antibody over an agarose-activated gel (e.g., Affi-Gel™, from Bio-Rad Laboratories, Richmond, CA, prepared following manufacturer's instructions) and used to purify OP-1 from serum. Human serum then was passed over the column and eluted with 3M K-thiocyanate. K-thiocyanante fractions then were dialyzed in 6M urea, 20mM PO₄, pH 7.0, applied to a C8 HPLC column, and eluted with a 20 minute, 25-50% acetonitrile/0.1% TFA gradient. Mature, recombinantly produced OP-1 homodimers elute between 20-22 minutes. Fractions then were collected and tested for the presence of OP-1 by standard immunoblot using an OP-1 specific antibody as for Example 2.A.

[0088] Administered or endogenous morphogen levels may be monitored in the therapies described herein by com-

paring the quantity of morphogen present in a body fluid sample with a predetermined reference value, for example, to evaluate the efficiency of a therapeutic protocol, and the like. In addition, fluctuations in the level of endogenous morphogen antibodies may be detected by this method, most likely in serum, using an antibody or other binding protein capable of interacting specifically with the endogenous morphogen antibody. Detected fluctuations in the levels of the morphogen or indogenous antibody may be used, for example, as indicators of a change in tissue status. For example, as damaged tissue is regenerated and the tissue or organ's function returns to "normal" and, in the absence of additional tissue damage, lower doses of morphogen may be required, and a higher level of circulating morphogen antibody may be measured.

## 10 Example 3. Effect of Morphogen after the Onset of the Ischemic Process

[0089] The cardioprotective effect of morphogens following ischemic-reperfusion injury in a mammal can readily be assessed in a rat model. In this example, morphogen (e.g., OP-1) is administered just prior to the onset of the ischemic process in experimentally-induced myocardial infracted rats, essentially following the method of Lefer, et al. (1990) <u>Science</u> <u>249</u>:61-64 and (1992) <u>J. Mol. Cell. Cardiol.</u> <u>24</u>: 385-393. Briefly, loss of myocardial tissue function following ischemia and reperfusion is assayed by measuring loss of myocardial creatine kinease activity (CK) and loss of endothelium-dependent vasorelaxation function (see Example 4, below).

[0090] In a first group of ether-anesthetized rats, the left coronary artery was occluded just proximal to the first main branch with a silk ligature to induce a myocardial infarction (MI). The ligature was removed 10 minutes after occlusion to allow for coronary reperfusion. This first group is referred to herein as the "myocardial infarcted" (MI) group. A second group of rats underwent the same procedure except that the coronary artery was not occluded, and thus no myocardial infarction occurred. The second group of rats is referred to herein as the "sham myocardial infarcted group" (SHAM MI).

[0091] The first group of rats, the MI group of rats, further was divided into three sup-groups. 2μg of morphogen (OP-1) were injected intravenously into the first sub-group of MI rats 10 minutes after ligature, immediately before reperfusion; into the second sub-group of MI rats 20 μg of OP-1 were injected intravenously 10 minutes after ligature and immediately before reperfusion; and into the third sub-group of MI rats (control) was injected vehicle only, e.g., 0.9% NaCI, as for the OP-1 treated rats.

[0092] Twenty-four hours later, the hearts were removed from all of the rats and the levels of creatine kinase (CK) from the left ventricle (the infarcted region) and from the interventricular septum (the control nonischemic region) were determined by standard means. By comparing the difference in CK activities in both regions, the amount of CK activity lost from the infarcted region was used as an index of cardiac cellular injury to the infarcted region.

[0093] As shown in Figure 1, the data indicate that morphogens (e.g., OP-1) can provide significant cardioprotective effect when provided to ischemic tissue. In the figure, CK loss is graphed as the difference in specific CK activity between the interventricular septum and the left ventricle.

[0094] The loss of CK activity by the subgroup of MI rats which received 2 µg of OP-1 just before reperfusion showed some protection as compared with the control MI rats which received injections of vehicle alone, when the levels from both subgroups are measured against, and compared to, the levels obtained for the SHAM MI control. Significant cardioprotection was observed in the subgroup of MI rats which received 20 µg of OP-1 immediately before reperfusion as compared with the control MI rats which received injections of vehicle alone, when the levels from both subgroups are measured against, and compared to, the levels contained within the SHAM MI control.

[0095] These data indicate that OP-1 offers significant cardiac protection when administered after ischemia and before reperfusion.

[0096] A variation of this example also may be performed providing morphogen to the animal prior to induction of ischemia. The experiments may be performed both in normal and immune-compromised rats to assess the cardioprotective effects of morphogen administered prior to ischemia.

## Example 4. Vasodilation of Myocardial Infarcted Cardiac Tissue Treated with Morphogen

[0097] Certain vasodilators like acetylcholine (ACh) and adenosine diphosphate (ADP, an immune mediator) exert their vasodilation activity only in the presence of intact endothelium, which is stimulated to release a substance termed endothelium-derived relaxing factor (EDRF). If the endothelium is injured so that EDRF is not released, no vasodilation occurs in response to these endothelium-dependent agents. In contrast, several other vasodilators including nitroglycerine (NTG) and nitrogrusside, are endothelium-independent dilators, as they dilate blood vessels directly.

[0098] The present example demonstrates the ability of OP-1 to prevent the loss of cardioendothelium-dependent relaxation (EDR) activity in the coronary microvasculature following reperfusion of ischemic myocardium, and their ability to reduce myocardial injury 24 hours after morphogen treatment. Briefly, 2 or 24 hours after morphogen treatment ischemia-r perfusion injury is induced in isolated rat hearts, the reperfused hearts are are vasodilated with either ACh or NTG. In the absence of morphogen treatment, injured tissue should inhibit ACh-induced vasodilation, but not NTG-

induced vasodilation. Morphogen treatment in expected to enhance ACh-induced vasodilation in the reperfused hearts.

[0099] Accordingly, 48 adult male Sprague-Dawley rats (250-330 g) wer divided into eight groups of 6 rats each. Twelve rats were subjected to sham myocardial infarcts (SHAM MI) as described in Example 3. The hearts of the remaining 36 rats were isolated as follows: one set of twelve rats was injected intravenously with OP-1 24 hours prior to isolation of the heart; another set of rats was injected intravenously with 20µg of OP-1 2 hours prior to isolation of the heart; the final group of rats was injected with vehicle only (e.g., 0.9% NaCl.). The rats then were anesthetized with pentobarbital sodium (35 mg/kg, intraperitonial); their hearts were isolated and perfused by the Langendorff method at a constant flow (15 ml/min) with oxygenated Krebs-Henseleit solution (Aoki et al. (1988) J. Pharmacol. 95:35).

[0100] Each group of rats then were divided into two subgroups of six rats each. Twenty minutes before reperfusion, coronary vasodilator response was measured by inducing constriction with 0.05 µmol U-44619 (9,11-methanoepoxy-prostaglandin H<sub>2</sub>) followed by a vasodilating agent 3 minutes later: subgroup one - 15 nmol ACh; subgroup 2 - 15 nmol NTG and the increase in coronary perfusion pressure (CPP) level measured as an indication of vasodilation. When CPP levels returned to normal, the hearts were subjected to ischemia by reducing coronary infusion to 15% of control flow for 30 minutes, then reestablishing normal flow, i.e., reperfusion, for an additional 20 minutes.

[0101] The vasodilator reponse then was remeasured by constriction and administration of vasodilating agent as described above.

[0102] The results of these experiments are shown in FIG 2. Before the ischemic event, both Ach and NTG gave normal vasorelaxant results in all events. The hearts which received OP-1 24 hours prior to ischemia showed an approximately 70% response to ACh while the hearts which received OP-1 2 hours prior to ischemia showed a 55% response to ACh. The group which received vehicle alone showed a 40% response to ACh. Finally, the control group which was not subjected to ischemia showed an ACh response of approximately 95%. This shows that endothelium-dependent vasodilators exert a reduced vasodilator response following ischemia and reperfusion in the rat heart. Moreover, OP-1 significantly preserved endothelium-dependent dilation when provided 24 hours prior to induction of myocardial ischemia. No defect in vasodilation occurred in response to the direct vasodilator (NTG); NTG-induced vasodilation activities were 95% of initial in hearts subject to ischemia and 100% of initial nonischemic hearts.

## Example 5. Effect of Morphogen on Neutrophil Adherence

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[0103] The role of neutrophil adherence in endothelium dysfunction and the cardioprotective effects of morphogens in modulating this activity can be assessed using a standard polymorphonuclear neutrophil (PMN) adherence assay such as described in Lefer et al., (1992) J. Mol. Cell. Cardiol. 24: 385-393. Briefly, segments of superior mesenteric artery were isolated from rats which had either been treated with morphogen (OP-1, 20 μg) or 0.9% NaCl, 24 h prior to isolation of the artery. The segments were cleaned, cut into transverse rings of 1-2mm in length, and these were subsequently cut open and incubated in K-H solution at 37°C, pH 7.4. Neutrophils were prepared and fluorescently labelled using standard procedures (e.g., leukocytes were isolated from rats essentially following the procedure of Pertroft et. al. (1968) Exp Cell Res 50: 355-368, washed in phosphate buffered saline (PBS), purified by gradient centrifugation; and labelled by the method of Yuan et. al. (1990) Microvasc Res 40: 218-229.

[0104] Labelled neutrophils then were added to open ring baths and activated with 100nM leukotriene B<sub>4</sub> (LTB<sub>4</sub>). Rings were incubated for 20 minutes and the number of neutrophils adhering to the endothelial surface then determined visually by fluorescent microscopy.

[0105] As shown in Figure 3, unstimulated PMNs (i.e., PMNS alone) added to the baths did not significantly adhere to the vascular endothelium. In rings taken from rats injected with 0.9% NaCl, activation of neutrophils with LTB<sub>4</sub> (100 nM) greatly increased the number of PMNs adherent to the endothelium (P<0.001). OP-1 (20  $\mu$ g administered 24 h prior) significantly inhibited adherence of PMNs activated by LTB<sub>4</sub> (P<0.01 from control).

Example 6. In Vivo Models for Ischemic-Reperfusion Protection in Lung, Nerve and Renal Tissue.

[0106] Other tissues seriously affected by ischemic-reperfusion injury include neural tissue, renal tissue and lung tissue. The effect of morphogens on alleviating the ischemic-reperfusion injury in these tissues may be assessed using methodologies and models known to those skilled in the art, and disclosed below. Similarly, a methodology also is provided for assessing the tissue-protective effects of a morphogen on damaged lung tissue following hyperoxia injury.

[0107] For example, the rabbit embolic stroke model provides a useful method for assessing the effect of morphogens on tissue injury following cerebral ischemia-reperfusion. The protocol disclosed below is essentially that of Phillips et al. (1989) Annals of Neurology 25:281-285. Briefly, white New England rabbits (2-3kg) are anesthesized and placed on a respirator. The intracranial circulation then is selectively catheterized by the Seldinger technique. Baseline cerebral angiography then is performed, employing a digital substration unit. The distal internal carotid artery or its branches then is selectively embolized with 0.035 ml of 18-hour-aged autologous thrombus. Arterial occlusion is documented by repeat angiography immediately after embolization. After a time sufficient to induce cerebral infarcts (15 minutes or 90

minutes), reperfusion is induced by administering a bolus of a reperfusion agent such as the TPA analogue Fb-FB-CF (e.g., 0.8 mg/kg over 2 minutes).

[0108] The effect of morphogen on cerebral infarcts can be assessed by administering varying concentrations of morphogens, e.g., OP1, at different times preceding or following embolization and/or reperfusion. The rabbits are sacrificed 3-14 days post embolization and their brains prepared for neuropathological examination by fixing by immersion in 10% neutral buffered formalin for at least 2 weeks. The brains then are sectioned in a coronal plane at 2-3 mm intervals, numbered and submitted for standard histological processing in paraffin, and the degree of neutral tissue necrosis determined visually.

[0109] The renal-protective effects of morphogens on renal ischemia-reperfusion injury readily can be assessed using the mouse model disclosed by Oueliette, et al. (1990), <u>J. Clin. Invest.</u> <u>85</u>:766-771. Briefly, renal ischemia is induced surgically in 35-45 days old out-bred Swiss male mice by performing a standard right nephrectomy, and occluding the artery to the left kidney with a microaneurism clamp for 10-30 minutes. Morphogen then may be provided parentally, at various times prior to or following occulsion and/or reperfusion. The effects of morphogen then may be assessed by biological evaluation and histological evaluation using standard techniques well known in the art.

[0110] The tissue protective effects of morphogen on tissue exposed to lethally high oxygen concentrations may be assessed by the following procedure. Adult rats (275-300 gms) first are provided with morphogen (e.g., hOP1) or vehicle only, and then are exposed to 96-98% oxygen essentially as described by Rinaldo et al (1983) Am. Rev. Respir. Dis. 130:1065, to induce hyperoxia. Animals are housed in plastic cages (38 cm x 48 xm x 21 cm). A cage containing 4-5 animals is placed in a 75 liter water-sealed plexiglass chamber. An atmosphere of 96-98% oxygen then is maintained by delivery of  $0_2$  gas (liquid  $0_2$ ). Gas flow through the chamber is adjusted to maintain at least 10 air changes/hr., temperature at  $22 \pm 1^{\circ}$ C, minimal levels of condensation within the cage, and carbon dioxide concentration of < 0.5% as measured with a mass spetrophotometric medical gas analyzer.

[0111] At the end of 72 hours all survivors are observed at room air for 1.5 hours and at longer time periods to assess degree of respiratory distress and cyanosis induced by the initial insult and subsequent immune cell-mediated damage. The number of survivors at the end of the challenge is recorded and the treated groups compared with the untreated control group by chi-square test of proportions. Several of the surviving animals for each group are randomly chosen for histological processing of lung tissue.

[0112] Lung tissue for histological processing is fixed by infusion of 10% buffered formalin through a tracheal cannula at a constant pressure of 20 cm H<sub>2</sub>O. After fixation for 24-48 hours, sections from each lobe are cut and subsequently stained with hematoxylin and eosin. Coded slides then are examined, preferably in a double-blind fashion for evidence of pathological changes such as edema, interstitial cellularity, and inflammatory response.

# Example 7. Morphogen Inhibition of Cellular and Humoral Inflammatory Response

[0113] Morphogens described herein inhibit multinucleation of mononuclear phagocytic cells under conditions where these cells normally would be activated, e.g., in response to a tissue injury or the presence of a foreign substance. For example, in the absence of morphogen, an implanted substrate material (e.g., implanted subcutaneously) composed of, for example, mineralized bone, a ceramic such as titanium oxide or any other substrate that provokes multinucleated giant cell formation, rapidly becomes surrounded by multinucleated giant cells, e.g., activated phagocytes stimulated to respond and destroy the foreign object. In the presence of morphogen however, the recruited cells remain in their mononuclear precursor form and the matrix material is undisturbed. Figure 4 illustrates this effect of morphogens, in a schematic representation of histology results of a titanium oxide substrate implanted subcutaneously. In the figure, "mg" means mononuclear giant cells and "ob" means osteoblasts. The substrate represented in Fig. 4B was implanted together with morphogen (OP-1) and newly formed osteoblasts are evident surrounding the substrate. By contrast, the substrate represented in Fig. 4A was implanted without morphogen and extensive multinucleated giant cell formation is evident surrounding the substrate. Accordingly, the morphogens' effect in inhibiting excessive bone mass loss in a mammal also may include inhibiting activation of these cells.

[0114] In addition, the morphogens described herein also suppress antibody production stimulated in response to a foreign antigen in a mammal. Specifically, when bovine bone collagen matrix alone was implanted in a bony site in a rat, a standard antibody response to the collagen is stimulated in the rat as determined by standard anti-bovine collagen ELISA experiments performed on blood samples taken at four week intervals following implantation (e.g., between 12 and 20 weeks.) Serum anti-collagen antibody titers, measured by ELISA essentially following the procedure described by Nagler-Anderson et al, (1986) PNAS 83:7443-7446, increased consistently throughout the experiment. However, when the matrix was implanted together with a morphogen (e.g., OP-1, dispersed in the matrix and adsorbed thereto, essentially as described in U.S. Pat. No. 4,968,590) anti-bovine collagen antibody production was suppressed significantly. This ability of morphogen to suppress the humoral response is further evidence of morphogen utility in alleviating tissue damage associated with autoimmune diseases, including autoantibody diseases, such as rheumatoid arthritis.

## Example 8. Morphogen protection of Gastrointestinal Tract Mucosa from Ulceration and Inflammation

[0115] Oral mucositis is a gastrointestinal tract inflammatory disease which involves ulcerations of the mouth mucosa as a consequence of, e.g., radiation therapy or chemotherapy. While not typically a chronic disease, the tissue destructive effects of oral mucositis mirror those of chronic inflammatory diseases such as IBD. The example below demonstrates morphogen efficacy in protecting the oral mucosa from oral mucositis in a hamster model, including both inhibiting inflammatory ulceration and enhancing regeneration of ulcerated tissue. Details of the protocol can be found in Sonis, et al., (1990) Oral Surg. Oral Med. Oral Pathol 69: 437-443. Based on these data, the morphogens described herein should be efficacious in treating chronic inflammatory diseases including IBD, arthritis, psoriasis and psoriatic arthritis, multiple sclerosis, and the like.

[0116] Golden syrian hamsters (6-8 wks old, Charles River Laboratories, Wilmington, MA) were divided into 3 test groups: Group 1, a placebo (e.g., saline) control, and a morphogen low dose group (100 ng) and a morphogen high dose group (1 µg), Groups 2 and 3, respectively. Morphogen dosages were provided in 30% ethanol. Each group contained 12 animals.

[0117] Beginning on day 0 and continuing through day 5, Groups 2 and 3 received twice daily morphogen applications. On day 3, all groups began the mucositis-induction procedure. 5-fluorouracil (60 mg/kg) was injected intraperitoneally on days 3 and 5. On day 7, the right buccal pouch mucosa was superficially irritated with a calibrated 18 gauge needle. In untreated animals, severe ulcerative mucositis was induced in at least 80% of the animals by day 10.

[0118] For each administration of the vehicle control (placebo) or morphogen, administration was performed by first gently drying the cheek pouch mucosa, then providing an even application over the mucosal surface of the vehicle or morphogen material. A hydroxypropylcellulose-based coating was used to maintain contact of the morphogen with the mucosa. This coating provided at least 4 hours of contact time.

[0119] On day 12, two animals in each group were sacrificed for histological studies. The right buccal pouch mucosa and underlying connective tissue were dissected and fixed in 10% formalin using standard dissection and histology procedures. The specimens were mounted in paraffin and prepared for histologic examination. Sections then were stained with hematoxylin and eosin and were examined blindly by three oral pathologists with expertise in hamster histology and scored blind against a standard mucositis panel. The extent of atrophy, cellular infiltration, connective tissue breakdown, degree of ulceration and epithelialization were assessed.

[0120] The mean mucositis score for each group was determined daily for each experimental group for a period of 21 days by photography and visual examination of the right buccal cheek pouch. Differences between groups were determined using a standard 't' test, e.g., the Students' 't' test. In addition, data was evaluated between groups by comparing the numbers of animals with severe mucositis using Chi Square statistical analysis. The significance of differences in mean daily weights also was determined.

[0121] The experimental results are presented in Fig. 5, which graphs the effect of morphogen (high dose, squares; low dose, diamonds) and placebo (circles) on mean mucositis scores. Both low and high morphogen doses inhibit lesion formation significantly in a dose-dependent manner. In addition, histology results consistently showed significantly reduced amounts of tissue atrophy, cellular debris, and immune effector cells, including macrophages and activated neutrophils, in the morphogen-treated animals, as compared with the untreated, control animals.

#### 40 Example 9. Morphogen Effect on Fibrogenesis and Scar Tissue Formation

[0122] The morphogens described herein induce tissue morphogenesis of damaged or lost tissue. The ability of these proteins to regenerate new tissue enhances the anti-inflammatory effect of these proteins. Provided below are a series of in vitro experiments demonstrating the ability of morphogens to induce migration and accumulation of mesenchymal cells. In addition, the experiments demonstrate that morphogens, unlike TGF- $\beta$ , do not stimulate fibrogenesis or scar tissue formation. Specifically, morphogens do not stimulate production of collagen, hyaluronic acid (HA) or metalloproteinases in primary fibroblasts, all of which are required for fibrogenesis or scar tissue formation. By contrast, TGF- $\beta$ , a known inducer of fibrosis, but not of tissue morphogenesis, does stimulate production of these fibrosis markers.

[0123] Chemotaxis and migration of mesenchymal progenitor cells were measured in modified Boyden chambers essentially as described by Fava, R.A. et al (1991) <u>J. Exp. Med.</u> <u>173</u>: 1121-1132, using polycarbonate filters of 2, 3 and 8 micron ports to measure migration of progenitor neutrophils, monocytes and fibroblasts. Chemotaxis was measured over a range of morphogen concentrations, e.g., 10<sup>-20</sup>M to 10<sup>-12</sup>M OP-1. For progenitor neutrophils and monocytes, 10<sup>-18</sup>-10<sup>-17</sup>M OP-1 consistently induced maximal migration, and 10<sup>-14</sup> to 10<sup>-13</sup>M OP-1 maximally induced migration of progenitor fibroblasts. In all cases the chemotactic activity could be inhibited with anti-OP-1 antibody. Similar migration activities also were measured and observed with TGF-β.

[0124] The effect of morphogen on fibrogenesis was determined by evaluating fibroblast production of hyaluronic acid (HA), collagen, collagenese and tissu inhibitor of metalloproteinases (TIMP).

[0125] Human fibroblasts were established from explants of infant foreskins and maintained in monolayer culture using standard culturing procedures. (See, for example, (1976) J. Exp. Med. 144: 1188-1203.) Briefly, fibroblasts were grown in maintenance medium consisting of Eagle's MEM, supplemented with nonessential amino acids, ascorbic acid (50  $\mu$ g/ml), NaHCO<sub>3</sub> and HEPES buffers (pH 7.2), penicillin (100 U/ml), streptomycin (100  $\mu$ g/ml), amphotericin B (1  $\mu$ g/ml) and 9% heat inactivated FCS. Fibroblasts used as target cells to measure chemotaxis were maintained in 150 mm diameter glass petri dishes. Fibroblasts used in assays to measure synthesis of collagen, hyaluronic acid, collagenase and tissue inhibitors of metalloproteinases (TIMP) were grown in 100 mm diameter plastic tissue culture petri dishes.

The effects of morphogen on fibroblast production of hyaluronic acid, collagens, collagenase and TIMP were [0126] determined by standard assays (See, for example, Posttethwaite et al. (1989) J. Clin. Invest. 83: 629-636, Posttethwaithe (1988) J./ Cell Biol. 106: 311-318 and Clark et al (1985) Arch. Bio-chem Biophys. 241: 36-44). For these assays, fibroblasts were transferred to 24-well tissue culture plates at a density of 8 x 10<sup>4</sup> cells per well. Fibroblasts were grown confluency in maintenance medium containing 9% FCS for 72 h and then grown in serum-free maintenance medium for 24 h. Medium was then removed from each well and various concentrations of OP-1 (recombinantly produced mature or soluble form) or TGF-β-1 (R&D Systems, Minneapolis) in 50 μl PBS were added to triplicate wells containing the confluent fibroblast monolayers. For experiments that measured production of collagenase and TIMP, maintenance medium (450 µl) containing 5% FCS was added to each well, and culture supernatants were harvested from each well 48 h later and stored at -70°C until assayed. For experiments that assessed HA production, maintenance medium (450 μl) containing 2.5% FCS was added to each well, and cultures grown for 48 h. For experiments that measured fibroblast production of collagens, serum-free maintenance medium (450 µl) without non-essential amino acids was added to each well and cultures grown for 72 h. Fibroblast production of HA was measured by labeling newly synthesized glycosaminoglycans (GAG) with [3H]-acetate the last 24 h of culture and quantitating released radioactivity after incubation with hyaluronidase from Streptomyces hyalurolyticus (ICN Biochemicals, Cleveland, OH) which specifically degrades hyaluronic acid. Production of total collagen by fibroblasts was measured using a collagenase-sensitive protein assay that reflects [3H]-proline incorporation the last 24 h of culture into newly synthesized collagens. Collagenase and TIMP protein levels in fibroblast cultures supernatants was measured by specific ELISAs.

[0127] As shown in Fig. 6, OP1 does not stimulate significant collagen or HA production, as compared with TGF- $\beta$ . In the figure, panel A shows OP-1 efect on collagen production, panel B shows TGF- $\beta$  effect on collagen production, and panels C and D show OP-1 (panel C) and TGF- $\beta$  (panel D) effect on HA production. The morphogen results were the same whether the soluble or mature form of OP1 was used. By contrast, the latent form of TGF- $\beta$  (e.g., pro domain-associated form of TGF- $\beta$ ) was not active.

#### Example 10. Morphogen Inhibition of Epithelial Cell Proliferation

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[0128] This example demonstrates the ability of morphogens to inhibit epithelial cell proliferation in vitro, as determined by <sup>3</sup>H-thymidine uptake using culture cells from a mink lung epithelial cell line (ATCC No. CCL 64), and standard mammalian cell culturing procedures. Briefly, cells were grown to confluency in Eagle's minimum essential medium (EMEM) supplemented with 10% fetal bovine serum (FBS), 200 units/ml penicillin, and 200 μg/ml streptomycin, and used to seed a 48-well cell culture plate at a cell density of 200,000 cells per well. When this culture became confluent, the media was replaced with 0.5 ml of EMEM containing 1% FBS and penicillin/streptomycin and the culture incubated for 24 hours at 37 C. Morphogen test samples in EMEM containing 5% FBS then were added to the wells, and the cells incubated for another 18 hours. After incubation, 1.0 μCi of <sup>3</sup>H-thymidine in 10 μl was added to each well, and the cells incubated for four hours at 37 C. The media then was removed and the cells washed once with ice-cold phosphate-buffer saline and DNA precipitated by adding 0.5 ml of 10% TCA to each well and incubating at room temperature of 15 minutes. The cells then were washed three times with ice-cold distilled water, lysed with 0.5 ml 0.4 M NaOH, and the lysate from each well then transferred to a scintillation vial and the radioactivity recorded using a scintillation counter (Smith-Kline Beckman).

[0129] The results are presented in Table III, below. The anti-proliferative effect of the various morphogens tested was expressed as the counts of 3H-thymidine (x 1000) integrated into DNA, and were compared with untreated cells (negative control) and TGF-β (1 ng), a local-acting factor also known to inhibit epithelial cell proliferation. COP-5 and COP-7 are biosynthetic constructs that previously have been shown to have osteogenic activity, capable of inducing the complete cascade resulting in endochondral bone formation in a standard rat bone assay (see U.S. Pat. No. 5,011,691.) The morphogens significantly inhibit epithelial cell proliferation. Similar experiments, performed with the morphogens COP-16, bOP (bone-purified osteogenic protein, a dimeric protein comprising CBMP2 and OP-1), and recombinant OP-1, also inhibit cell proliferation. bOP and COP-16 also induce endochondral bone formation (see US Pat. No. 4,968,590 and 5,011,691.)

TABLE III

Thymidine uptake (x 1000)

control 50.048, 53.692

COP-7-1 (10 ng) 11.874

COP-7-2 (3 ng) 11.136

COP-5-1 (66 ng) 16.094

COP-5-2 (164 ng) 14.43

TGF-β (1 ng) 1.86, 1.478

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Example 11. Morphogen Treatment of a Systemic Inflammatory Disease

[0130] The following example provides a rat adjuvant-induced arthritis model for demonstrating morphogen efficacy in treating arthritis and other systemic inflammatory diseases. Rat adjuvant-induced arthritis induces a systemic inflammatory disease with bone and cartilage changes similar to those observed in rhematoid arthritis, but in an accelerated time span (see, for example, Pearson (1964) <u>Arth. Rheum.</u> <u>7</u>:80). A detailed description of the protocol is provided in Walz, et al., (1971) J. Pharmac. Exp. Ther, 178: 223-231.

[0131] Briefly, Sprague-Dawley female rats (e.g., Charles River Laboratories, Wilmington, MA) are randomized into 3 groups: control; morphogen, low dose (e.g., 1-10 μg/kg weight per day) and morphogen, high dose (e.g., 10-20 μg/kg weight per day), referred to as Groups 1, 2, and 3, respectively.

[0132] Adjuvant arthritis is induced in all three groups by injection of 0.05 ml of a suspension of 1.5% dead Mycobacterium butyricum in mineral oil into the subplantar surface of the right hand paw. On Day 18 after adjuvant injection, the limb volumes of both hind limb are determined. In the absence of morphogen treatment, a systemic arthritic condition is induced in adjuvant-injected rats by this time, as determined by significant swelling of the uninjected hind limbs (< 2.3 ml, volume measured by mercury displacement). Subsequent determinations of paw edema and x-ray scores are made on the uninjected hind limb. Rats in Group 2 and 3 also are dosed orally daily, beginning on Day 1, with morphogen. Limb volumes are recorded on Days 29 and 50 after adjuvant injection and edema determined by volume difference compared to Day 18. The uninjected hind limb on each rat is x-rayed on Day 50 and the joint damage assayed on an arbitrary scale of 1 to 10 (1=no damage, 10=maximum damage). Data on differences between control and treated groups (Day 29 edema, Day 50 edema and Day 50 x-ray scores) are analyzed by using a standard "t-test. Morphogentreated rats show consistently reduced joint damage (e.g., decreased in edema and in x-ray scores) as compared with untreated control rats.

[0133] As another, alternative example, Groups 2 and 3 are dosed daily with morphogen beginning on Day 18 and continuing through Day 50 to demonstrate the efficacy of morphogens in arthritic animals.

#### Example 12. Morphogen Inhibition of Localized Edema

[0134] The following example demonstrates morphogen efficacy in inhibiting a localized inflammatory response in a standard rat edema model. Experimental rats (e.g., Long-Evans from Charles River Laboratories, Wilmington, MA) are divided into three groups: Group 1, a negative control, which receives vehicle alone; Group 2, a positive control, to which is administered a well-known characterized anti-inflammatory agent (e.g., indomethacin), and Group 3, to which morphogen is provided.

[0135] Groups 2 and 3 may be further subdivided to test low, medium and high doses (e.g., Group 2: 1.0 mg/kg, 3.0 mg/kg and 9.0 mg/kg indomethacin; Group 3: 0.1-5μg; 5-20μg, and 20-50μg of morphogen). Sixty minutes after indomethacin or morphogen is provided to the rats of Group 2 or 3 (e.g., as by injection into the tail vein, or by oral gavage) inflammation is induced in all rats by a sub-plantar injection of a 1% carrageenin solution (50μl) into the right hind paw. Three hours after carrageenin administration paw thickness is measured as an indication of edema (e.g., swelling) and induced inflammatory response to the injected carrageenin solution.

[0136] Significant swelling is evident in untreated rats by three hours after carrageenin injection. Inflammation also is measured by histology by standard means, following euthanasia e.g.: the right hind paw from each animal is removed at the ankle joint and weighed and foot pad tissue is fixed in 10% neutral buffered formalin, and slides prepared for visual examination by staining the prepared tissue with hematoxylin and eosin.

[0137] The morphogen-treated rats show substantially reduced edema induction following carrageenin injection as compared with the untreated rats.

#### Example 13. Morphogen Treatment of Allergic Encephalomyelitis

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[0138] The following example demonstrates morphogen efficacy in treating experimental allergic encephalomyelitis (EAE) in a rat. EAE is a well-characterized animal model for multiple sclerosis, an autoimmune disease. A detailed description of the protocol is disclosed in Kuruvilla, et al., (1991) PNAS 88:2918-2921.

[0139] Briefly, EAE is induced in rats (e.g., Long-Evans, Charles River Laboratories, Wilmington, MA) by injection of a CNS tissue (e.g., spinal cord) homogenate in complete Freund's adjuvant (CFA) on days -44, -30 and 0 (last day of immunization), by subcutaneous injection to three sites on the animal's back. Morphogen is administered daily by interperitoneal injection beginning on day -31. Preferably, a series of morphogen dose ranges is evaluated (e.g., low, medium and high) as for Example 12, above.) Control rats receive morphogen vehicle only (e.g. 0.9% NaCl or buffered saline). Rats are examined daily for signs of disease and graded on an increasing severity scale of 0-4.

[0140] In the absence of morphogen treatment, significant neurological dysfunction (e.g., hind and fore limb weakness, progressing to total hind limb paralysis) is evident by day +7 to +10. Hematology, serum chemistry profiles and histology are performed to evaluate the degree of tissue necropsy using standard procedures. Morphogen treatment significantly inhibits the neurological dysfunction normally evident in an EAE animal. In addition, the histopathological markers typically associated with EAE are absent in the morphogen-treated animals

#### Example 14. Morphogen Treatment of Collagen-Induced Arthritis

[0141] The following example demonstrates the efficacy of morphogens in inhibiting the inflammatory response in a collagen-induced arthritis (CIA) in a rat. CIA is a well-characterized animal model for rheumatoid arthritis, an autoimmune disease. The protocol disclosed is essentially that disclosed in Kuruvilla et al., (1991) PNAS 88:2918-2921. Briefly, CIA is induced in experimental rats (e.g., Long-Evans, Charles River Laboratories, Wilmington), by multiple intradermal injection of bovine Type II collagen (e.g., 100μg) in CFA (0.2 ml) on Day 1. Animals are divided into two groups: Group 1, control animals, which receive vehicle alone, and Group 2: morphogen-treated animals, which, preferably, are subdivided into low, medium and high dose ranges, as described for Example 13, above. Morphogen is administered daily (e.g., by tail vein injection) beginning at different times following collagen injection, e.g., beginning on day 7, 14, 28, 35 and 42. Animals are evaluated visually and paw thickness and body weight is monitored throughout the experiment. Animals are sacrificed on day 60 and the proximal and distal limb joints, and ear, tail and spinal cord prepared for histological evaluation as described for Examples 12 and 13, above. In a variation of the experiment, morphogen may be administered for prescribed periods, e.g., five day periods, beginning at different times following collagen injection (e.g., on days 0-4, 7-11, 14-18, 28-32.)

[0142] In the absence of morphogen treatment, an arthritic condition typically is induced by 30 days post collagen injection. In morphogen-treated animals, CIA is suppressed and the histopathological changes typically evidenced in control CIA-induced animals are absent: e.g., accumulations of activated mononuclear inflammatory cells and fibrous connective tissue. In addition, consistent with the results in Example 7, above, serum anti-collagen antibody titers are suppressed significantly in the morphogen-treated animals.

#### Example 15. Screening Assay for Candidate Compounds which Alter Endogenous Morphogen Levels

[0143] Candidate compound(s) which may be administered to affect the level of a given morphogen may be found using the following screening assay, in which the level of morphogen production by a cell type which produces measurable levels of the morphogen is determined with and without incubating the cell in culture with the compound, in order to assess the effects of the compound on the cell. This can be accomplished by detection of the morphogen either at the protein or RNA level. A more detailed description also may be found in USSN 752,861.

#### 15.1 Growth of Cells in Culture

[0144] Cell cultures of kidney, adrenals, urinary bladder, brain, or other organs, may be prepared as described widely in the literature. For example, kidneys may be explanted from neonatal or new born or young or adult rodents (mouse or rat) and used in organ culture as whole or sliced (1-4 mm) tissues. Primary tissue cultures and established cell lines, also derived from kidney, adrenals, urinary, bladder, brain, mammary, or other tissues may be established in multiwell plates (6 well or 24 well) according to conventional cell cultures techniques, and are cultured in the absence or presence of serum for a period of time (1-7 days). Cells may be cultured, for example, in Dulbecco's Modified Eagle medium (Gibco, Long Island, NY) containing serum (e.g., fetal calf serum at 1%-10%, Gibco) or in serum-deprived

medium, as desired, or in defined medium (e.g., containing insulin, transferrin, glucose, albumin, or other growth factors).

[0145] Samples for testing the level of morphogen production includes culture supernatants or cell lysates, collected periodically and evaluated for OP-1 production by immunoblot analysis (Sambrook et al., eds., 1989, Molecular Cloning, Cold Spring Harbor Press, Cold Spring Harbor, NY), or a portion of the cell culture itself, collected periodically and used to prepare polyA+ RNA for RNA analysis. To monitor de novo OP-1 synthesis, some cultures are labeled according to conventional procedures with an 35S-methionine/35S-cysteine mixture for 6-24 hours and then evaluated to OP-1 synthesis by conventional immunoprecipitation methods.

15.2 Determination of Level of Morphogenic Protein

[0146] In order to quantitate the production of a morphogenic protein by a cell type, an immunoassay may be performed to detect the morphogen using a polyclonal or monoclonal antibody specific for that protein. For example, OP-1 may be detected using a polyclonal antibody specific for OP-1 in an ELISA, as follows.

[0147] 1 μg/100 μl of affinity-purified polyclonal rabbit lgG specific for OP-1 is added to each well of a 96-well plate and incubated at 37°C for an hour. The wells are washed four times with 0.167M sodium borate buffer with 0.15 M NaCl (BSB), pH 8.2, containing 0.1% Tween 20™. To minimize non-specific binding, the wells are blocked by filling completely with 1% bovine serum albumin (BSA) in BSB and incubating for 1 hour at 37°C. The wells are then washed four times with BSB containing 0.1% Tween 20. A 100 μl aliquot of an appropriate dilution of each of the test samples of cell culture supernatant is added to each well in triplicate and incubated at 37°C for 30 min. After incubation, 100 μl biotinylated rabbit anti-OP-1 serum (stock solution is about 1 mg/ml and diluted 1:400 in BSB containing 1% BSA before use) is added to each well and incubated at 37°C for 30 min. The wells are then washed four times with BSB containing 0.1% Tween 20. 100 μl strepavidin-alkaline (Southern Biotechnology Associates, Inc. Birmingham, Alabama, diluted 1:2000 in BSB containing 0.1% Tween 20 before use) is added to each well and incubated at 37°C for 30 min. The plates are washed four times with 0.5M Tris buffered Saline (TBS), pH 7.2. 50μl substrate (ELISA Amplification System Kit, Life Technologies, Inc., Bethesda, MD) is added to each well incubated at room temperature for 15 min. Then, 50 μl amplifier (from the same amplification system kit) is added and incubated for another 15 min at room temperature. The reaction is stopped by the addition of 50 μl 0.3 M sulphuric acid. The OD at 490 nm of the solution in each well is recorded. To quantitate OP-1 in culture media, a OP-1 standard curve is performed in parallel with the test samples.

[0148] Polyclonal antibody may be prepared as follows. Each rabbit is given a primary immunization of 100 ug/500 μl E. coli produced OP-1 monomer (amino acids 328-431 in SEQ ID NO:5) in 0.1% SDS mixed with 500 μl Complete Freund's Adjuvant. The antigen is injected subcutaneously at multiple sites on the back and flanks of the animal. The rabbit is boosted after a month in the same manner using incomplete Freund's Adjuvant. Test bleeds are taken from the ear vein seven days later. Two additional boosts and test bleeds are performed at monthly intervals until antibody against OP-1 is detected in the serum using an ELISA assay. Then, the rabbit is boosted monthly with 100 μg of antigen and bled (15 ml per bleed) at days seven and ten after boosting.

[0149] Monoclonal antibody specific for a given morphogen may be prepared as follows. A mouse is given two injections of <u>E. coli</u> produced OP-1 monomer. The first injection contains 100μg of OP-1 in complete Freund's adjuvant and is given subcutaneously. The second injection contains 50 μg of OP-1 in incomplete adjuvant and is given intraperitoneally. The mouse then receives a total of 230 μg of OP-1 (amino acids 307-431 in SEQ ID NO:5) in four intraperitoneal injections at various times over an eight month period. One week prior to fusion, both mice are boosted intraperitoneally with 100 μg of OP-1 (307-431) and 30 μg of the N-terminal peptide (Ser<sub>293</sub>-Asn<sub>309</sub>-Cys) conjugated through the added cysteine to bovine serum albumin with SMCC crosslinking agent. This boost was repeated five days (IP), four days (IP), three days (IP) and one day (IV) prior to fusion. The mouse spleen cells are then fused to myeloma (e.g., 653) cells at a ratio of 1:1 using PEG 1500 (Boeringer Mannheim), and the cell fusion is plated and screened for OP-1-specific antibodies using OP-1 (307-431) as antigen. The cell fusion and monoclonal screening then are according to standard procedures well described in standard texts widely available in the art.

[0150] The invention may be embodied in other specific forms and the present embodiments are therefore to be considered in all respects as illustrative and not restrictive, the scope of the invention being indicated by the appended claims.

#### SEQUENCE LISTING

5	(1) GENERAL	INFORMATION:
10	(i)APPLIC	CANT: KUBERASAMPATH, THANGAVEL PANG, ROY H.L. OPPERMANN, HERMANN RUEGER, DAVID C. COHEN, CHARLES H. OZKAYNAK, ENGIN SHART, JOHN
15	(ii)	TITLE OF INVENTION: MORPHOGEN-INDUCED MODULATION OF INFLAMMATORY RESPONSE
	(iii)	NUMBER OF SEQUENCES: 33
20	(i∇)	CORRESPONDENCE ADDRESS:  (A) ADDRESSEE: CREATIVE BIOHOLECULES  (B) STREET: 35 SOUTH STREET  (C) CITY: HOPKINTON  (D) STATE: HASSACHUSETTS  (E) COUNTRY: U.S.A.  (F) ZIP:
25	(▽)	COMPUTER READABLE FORM:  (A) MEDIUM TYPE: Floppy disk  (B) COMPUTER: IBM PC compatible  (C) OPERATING SYSTEM: PC-DOS/MS-DOS  (D) SOFTWARE: Patent In Release #1.0, Version #1.25
30	(⊽ii)	PRIOR APPLICATION DATA:  (A) APPLICATION NUMBER: US 667,274  (B) FILING DATE: 11-MAR-1991
35	(vii)	PRIOR APPLICATION DATA:  (A) APPLICATION NUMBER: US 753,059  (B) FILING DATE: 30-AUG-1991
40	(⊽ii) (2)	PRIOR APPLICATION DATA:  (A) APPLICATION NUMBER: US 752.764  (B) FILING DATE: 30-AUG-1991  INFORMATION FOR SEQ ID NO:1:
	( i	SEQUENCE CHARACTERISTICS:  (A) LENGTH: 97 amino acids  (B) TYPE: amino acids  (C) TOPOLOGY: linear
45	( i	i) MOLECULE TYPE: protein

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		Thr	Asn	His -	Ala 85	Ile	Val	Gln	Thr	Leu 90
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		Pro 100	Lys	Pro	Cys	Cys	Ala 105	Pro	Thr	Gln
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15			Lys	His	Arg		Met	Val	Val	Lys	Ala 135
(2) INFORMATION FOR SEQ ID NO:8: (i) SEQUENCE CHARACTERISTICS: (A) LENGTH: 139 amino acids (B) TYPE: amino acids (C) TOPOLOGY: linear (ii) MOLECULE TYPE: protein (ix) FEATURE: (A) NAME: mOP-2 (mature form) (xi) SEQUENCE DESCRIPTION: SEQ ID NO:8:  26  Ala Ala Arg Pro Leu Lys Arg Arg Gln 1 5 Pro Lys Lys Thr Asn Glu Leu Pro His 10 15 Pro Asn Lys Leu Pro Gly Ile Phe Asp 20 25 Asp Gly His Gly Ser Arg Gly Arg Glu 30 35 Val Cys Arg Arg His Glu Leu Tyr Val 40  Ser Phe Arg Asp Leu Gly Trp Leu Asp 50 Trp Val Ile Ala Pro Gln Gly Tyr Ser 55 Ala Tyr Tyr Cys Glu Gly Glu Cys Ala 75 Phe Pro Leu Asp Ser Cys Met Asn Ala 75 Thr Asn His Ala Ile Leu Gln Ser Leu 85 Val His Leu Met Lys Pro Asp Val Val 44 45 Pro Lys Ala Cys Cys Ala Pro Thr Lys 100 Leu Ser Ala Thr Ser Val Leu Tyr Tyr 110 Asp Ser Ser Asn Asn Val Ile Leu Tyr Tyr	46		Cys	Gly	Cys	His					
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(ix) FEATURE: (A) NAME: Vgl(fx)													
5		(xi					_ •	<u>.</u>	SE	Q ID	NO:	12:	
		Cys	Lys	Lys	Arg	His 5	Leu	Tyr	Val	Glu	Phe 10	Lys	
		Asp	Val	Gly	Trp 15	Gln	Asn	Trp	Val	Ile 20		Pro	
10				25					Cys 30				
		-	35	_				40	Ile			•	
15		45					50		Thr			55	
						60	-		Pro		65	•	
20		-			70	_			Pro	75			
20				80				•	Asn 85 Val				
			90 Cys	_	GIU	nan	Mec	95	<b>V</b> 41	nap	GIU	Cys	
25		100	O, O	7									
30	(2)	INFO	( <i>I</i>		NCE ( SNGT! YPE:	CHARI H: :	CTEI 102 a ino a	RIȘT:	ICS:	ids			
		(ii) (ix)	F	LATUE	RE:	rype: Vgi	•	rote: £x)	in				
35		(xi)							SE(				
		<sup>-</sup> 1	-	-		5		_	Val		10		
40					15				Ile	20			
				25					Cys 30				
		-	35					40	His				
<b>4</b> 5		45					50		Thr			55	
						60	_		Pro		65		
50		Cys	ATS	PTO	Thr 70	Lys	val	ASN	Ala	75	261	vai	

			L u	Туз	Ph 8	_	sp i	Asp	Asn	Ser	_	_	al	Ile	Leu
5			Lys	Lys 90	Ty	•	rg i	Asn	Met	Val	. Va	5 1 A	rg	Ala	Cys
			Gly 100	Cys	Hi.	S									
10	(2)	INFC	RMA'	rion	FO:	R S	EQ :	ID N	10:1	4:					
10			(i (A	) I	EQU.	TH:	10	)6 a	CTE						
			(B (C	S	YPE	NDE	DNES	5 <b>5</b> :		gle					
15			(D)		OPO					otei	n.				
		∇) A)			WAL S	_									
20		(F	<b>'</b>		TYP			N							
			x) Fi D) 01	THER	INFO										
25					/prod					,					
		•	ĸi)		EQUE										
		Cys 1	Arg	Ala	Arg	Arg 5	Leu	Tyr	Val	Ser	Phe 10	Arg	Glu	ı Val	Gly
30	Trp 15	His	Arg	Trp	Val	Ile 20	Ala	Pro	Arg	Gly	Phe 25	Leu	Ala	Asn	Tyr
35	Cys 30	Gln	Gly	Gln	Cys	Ala 35	Leu	Pro	Val	Ala	Leu 40	Ser	Gly	Ser	Gly
	Gly 45	Pro	Pro	Ala	Leu	Asn 50	His	Ala	Val	Leu	Arg 55	Ala	Leu	Het	His
40	Ala 60	Ala	Ala	Pro	Gly	Ala 65	Ala	Asp	Leu	Pro	<b>Cys</b> 70	Cys	Val	Pro	Ala
	Arg 75	Leu	Ser	Pro	Ile	Ser 80	Val	Leu	Phe	Phe	Asp 85	Asn	Ser	Asp	Asn
45	Val 90	Val	Leu	Arg	Gln	Tyr 95	Glu	Asp	Het	Val	Val 100	Asp	Glu	Cys	Gly
50	Cys 105	Arg													

	(2)	n	POR	LATIC	N FC	R SE	Q ID	NO:	15:								
5			t)	· (	A) B) C)	nce Leng Type Stra Topo	TH: : an NDED	5 am ino NESS	ino acid : si	acid ngle	s						
10			(ii	) H	OLEC	ULE	TYPE	ı pe	ptid	e							
			(xi	) S	EQUE	NCE	DESC	RIPT	'ION :	SEQ	ID	NO: 1	5:				
15		Cy 1	s Xa	a Ia	a Xa	a <b>Xa</b> 5											
	(2)	IN	FORM	ATIO	N FO	R SE	Q ID	NO:	16:								
20			(1	, ( (	A) B) C)	nce Leng Type Strai Topo	TH: : nu NDED	1822 clei NESS	bas c ac : si	e pa id							
25			ii)	) H	OLEC	ULE '	TYPE	: cD	NA								
			(vi	(	A)	NAL ORGAI TISS	NISH	: HO	_		-						
30			(ix	, (	B) :	re: name. loca: othei	TION	: 49	13		tanda	ard_:	name:	- "h(	OP1"		
<i>35</i>			(xi	) S	EQUE	NCE I	DESC	RIPT	ION:	SEQ	ID I	NO:1	6:		•		
	GGT	GCGG	GCC (	CGGA	GCCC	GG A	GCCC	GGGT	A GC	GCGT	AGAG	CCG	GCGC(	Met		C GTG s Val	57
40			CTG Leu														105
<b>4</b> 5			TTC Phe														153
50			CAC His														201

5										Ile					His	CGC Arg		249
														Het		ATG Met		297
10																GGC Gly		345
15					TCC Ser											GGC Gly 115		393
20					AGC Ser 120													441
			Het		TTC Phe													489
25					CAC His													537
30	CCA Pro				GCT Ala													585
35					CGC Arg												•	633
40	CAG Gln			Gln													1	681
	GAC Asp		Arg	Thr		Trp	Ala	Ser	Glu	Glu	Gly	Trp	Leu	Val	Phe			729
45	ATC Ile	Thr					His										;	777
50	GGC Gly					Val					Gly						1	825

5		TTG Leu										Gln					873
		ATG Met															921
10		TCC Ser															969
15		AAC Asn															1017
20		GAC Asp 325															1065
		GAC Asp															1113
25		TAC Tyr															1161
30		GCC Ala															1209
<i>35</i>		GAA Glu															1257
		TCC Ser 405															1305
40		AGA Arg			Val								TAGO	TCCI	CC		1351
45	GAGA	ATTO	AG A	CCCI	TTGG	G GC	CAAG	III	TCI	GGAI	CCT	CCAI	TGCI	CG C	CITO	GCCAG	1411
	GAAC	CAGO	AG A	CCAA	CTGC	C TI	TTGI	GAGA	CCI	TCCC	CTC	CCTA	TCCC	CA A	CTTI	AAAGG	1471
	TGTG	AGAG	TA T	TAGG	AAAC	A TG	AGCA	GCAI	OTA 1	GCTI	TTG	ATCA	GTTI	TI C	AGTO	GCAGC	1531
50	ATCC	AATG	AA C	AAGA	TCCI	'A CA	AGCI	GTGC	AGG	CAAA	ACC	TAGO	AGGA	AA A	AAAA	ACAAC	1591

	GCATAAAGAA AAATGGCCGG GCCAGGTCAT TGGCTGGGAA GTCTCAGCCA TGCACGGACT	165
5	CGTTTCCAGA GGTAATTATG AGCGCCTACC AGCCAGGCCA CCCAGCCGTG GGAGGAAGGG	171
	GGCGTGGCAA GGGGTGGGCA CATTGGTGTC TGTGCGAAAG GAAAATTGAC CCGGAAGTTC	177
	CTGTAATAAA TGTCACAATA AAACGAATGA ATGAAAAAAA AAAAAAAAA A	1822
10	(2) INFORMATION FOR SEQ ID NO:17:	
15	(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 431 amino acids  (B) TYPE: amino acid  (D) TOPOLOGY: linear	
	(ii) MOLECULE TYPE: protein	
20	(ix) FEATURE: (D) OTHER INFORMATION: /Product="OP1-PP"	
	(x1) SEQUENCE DESCRIPTION: SEQ ID NO:17:	
25	Het His Val Arg Ser Leu Arg Ala Ala Ala Pro His Ser Phe Val Ala 1 5 10 15	
	Leu Trp Ala Pro Leu Phe Leu Leu Arg Ser Ala Leu Ala Asp Phe Ser 20 25 30	
30	Leu Asp Asn Glu Val His Ser Ser Phe Ile His Arg Arg Leu Arg Ser 35 40 45	
	Gln Glu Arg Arg Glu Het Gln Arg Glu Ile Leu Ser Ile Leu Gly Leu 50 55 60	
<i>35</i>	Pro His Arg Pro Arg Pro His Leu Gln Gly Lys His Asn Ser Ala Pro 65 70 75 80	
	Het Phe Het Leu Asp Leu Tyr Asn Ala Het Ala Val Glu Glu Gly 85 90 95	
40	Gly Pro Gly Gly Gln Gly Phe Ser Tyr Pro Tyr Lys Ala Val Phe Ser 100 105 110	
45	Thr Gln Gly Pro Pro Leu Ala Ser Leu Gln Asp Ser His Phe Leu Thr 115 120 125	
	Asp Ala Asp Met Val Met Ser Phe Val Asn Leu Val Glu His Asp Lys 130 135 140	
50	Glu Phe Phe His Pro Arg Tyr His His Arg Glu Phe Arg Phe Asp Leu 145 150 155 160	

	Ser	Lys	Ile	Pro	Glu 165	Gly	Glu	Ala	Val	Thr 170	Ala	Ala	Glu	Phe	Arg 175	Ile
5	Tyr	Lys		Тут 180	Ile	Arg	Glu	Arg	Phe 185	Asp	Asn	Glu	Thr	Phe 190	Arg	Ile
10	Ser	Val	Tyr 195	Gln	Val	Leu	Gln	Glu 200	His	Leu	Gly	Arg	Glu 205	Ser	Asp	Leu
	Phe	Leu 210	Leu	Asp	Ser	Arg	Thr 215	Leu	Trp	Ala	Ser	Glu 220	Glu	Gly	Trp	Leu
15	Val 225	Phe	Asp	Ile	Thr	Ala 230	Thr	Ser	Asn	His	Trp 235	Val	Val	Asn	Pro	Arg 240
	His	Asn	Leu	Gly	Leu 245	Gln	Leu	Ser	Val	Glu 250	Thr	Leu	Asp	Gly	Gln 255	Ser
20	Ile	Asn	Pro	Lys 260	Leu	Ala	Gly	Leu	Ile 265	Gly	Arg	His	Gly	Pro 270	Gln	Asn
25	Lys	Gln	Pro 275	Phe	Met	Val	Ala	Phe 280	Phe	Lys	Ala	Thr	Glu 285	Val	His	Phe
	Arg	Ser 290	Ile	Arg	Ser	Thr	Gly 295	Ser	Lys	Gln	Arg	Ser 300	Gln	Asn	Arg	Ser
30	Lys 305	Thr	Pro	Lys	Asn	Gln 310	Glu	Ala	Leu	Arg	Met 315	Ala	Asn	Val	Ala	Glu 320
	Asn	Ser	Ser	Ser	Asp 325	Gln	Arg	Gln	Ala	Cys 330	Lys	Lys	His	Glu	Leu 335	Tyr
35	Val	Ser		Arg 40	Asp	Leu	Gly	Trp	Gln 345	Asp	Trp	Ile	Ile	Ala 350	Pro	Glu
40	Gly	Tyr	Ala 355	Ala	Tyr	Tyr	Cys	Glu 360	Gly	Glu	Cys	Ala	Phe 365	Pro	Leu	Asn
	Ser	Tyr 370	Het	Asn	Ala	Thr	Asn 375	His	Ala	Ile	Val	Gln 380	Thr	Leu	Val	His
45	Phe 385	Ile	Asn	Pro	Glu	Thr 390	Val	Pro	Lys	Pro	Cys 395	Cys	Ala	Pro	Thr	Gln 400
	Leu	Asn	Ala		Ser 405	Val	Leu	Tyr	Phe	Asp 410	Asp	Ser	Ser	Asn	Val 415	Ile
50	Leu	Lys		Tyr 20	Arg	Asn	Het	Val	Val 425	Arg	Ala	Cys	Gly	Cys 430	His	

	(2)	IN	FORE	ATI	N FO	R SE	Q 1D	NU:	18:								
5			(i	()	B) C)	LENG TYPE STRA	TH: : nu NDED	1873 clei NESS	bas c ac	e pa id ngle	irs						
10			(ii	) H	OLEC	ULE	TYPE	: cD	NA								
			(Vi	, (	RIGI A) F)	ORGA	NISH	: HU	RIDA EMB								
15			(ix	()	EATU A) B) (D)	name Loca	TION	: 10	41		note	= "H	OP1	(CDN	A)"		
20			(xi	) S	EQUE	NCE :	DESC	RIPT	ION:	SEQ	ID	NO: 1	8:				
	CTG	CAGC.	AAG 1	TGAC	CTCG	GG I	CGTG	GACC	G CT	GCCC	TGCC	CCC	TCCG	CTG	CCAC	CTGGGG	60
25	CGG	CGCG	GGC (	CCGG	TGCC	CC G	GATC	GCGC	G TA	GAGC	CGGC	GCG		CAC His			115
30				GCT Ala													163
35	CTG Leu	TTC Phe	TTG Leu	CTG Leu	CGC Arg 25	TCC Ser	GCC Ala	CTG Leu	GCC Ala	GAT Asp 30	TTC Phe	AGC Ser	CTG Leu	GAC Asp	AAC Asn 35	GAG Glu	211
	GTG Val	CAC His	TCC Ser	AGC Ser 40	TTC Phe	ATC Ile	CAC His	CGG Arg	CGC Arg 45	CTC Leu	CGC Arg	AGC Ser	CAG Gln	GAG Glu 50	CGG Arg	CGG Arg	259
40	GAG Glu	ATG Net	CAG Gln 55	CGG ATg	GAG Glu	ATC Ile	CTG Leu	TCC Ser 60	ATC Ile	TTA Leu	GGG Gly	TTG Leu	CCC Pro 65	CAT His	CGC Arg	CCG Pro	307
45	CGC Arg	CCG Pro 70	CAC His	CTC Leu	CAG Gln	GGA Gly	AAG Lys 75	CAT His	AAT Asn	TCG Ser	GCG Ala	CCC Pro 80	ATG Het	TTC Phe	ATG Het	TTG Leu	355
50	GAC Asp 85	CTG Leu	TAC Tyr	AAC Asn	GCC Ala	ATG Met 90	GCG Ala	GTG Val	GAG Glu	GAG Glu	AGC Ser 95	GGG Gly	CCG Pro	GAC Asp	GGA Gly	CAG Gln 100	403

5					CCC Pro 105													451
					CAG Gln													499
10					AAC Asn													547
15			CAC		CGG Arg													595
					ACC Thr												(	643
20					GAC Asp 185												(	691
25					TCA Ser												;	739
30					GCT Ala												7	787
<i>35</i>					CAC His												8	335
35					GAG Glu													383
40					GGA Gly 265												ģ	931
45	GTG Val	GCC Ala	TTC Phe	TTC Phe 280	AAG Lys	GCC Ala	ACG Thr	GAA Glu	GTC Val 285	CAT His	CTC Leu	CGT Arg	AGT Ser	ATC Ile 290	CGG Arg	TCC Ser	ģ	979
50					CAG Gln												10	)27

•

5																GAC Asp	1075
		AGG Arg															1123
10		GGC Gly															1171
15		TGT Cys	Glu														1219
20		AAC Asn															1267
		GTA Val 390															1315
25		CTC Leu															1363
30		ATG Het							Cys		TAGC	TCTT	CC I	GAGA	CCCT	'G	1413
	ACCT	TTGC	GG G	GCCA	CACC	T TI	CCAA	ATCT	TCG	ATGT	CTC	ACCA	TCTA	AG T	CTCT	CACTG	1473
35	CCCA	CCTT	GG C	GAGG	AGAA	C AG	ACCA	ACCT	CTC	CTGA	GCC	TTCC	CTCA	CC T	CCCA	ACCGG	1533
	AAGC	ATGI	AA G	GGTT	CCAG	A AA	CCTG	AGCG	TGC	AGCA	GCT	GATG	AGCG	сс с	TTTC	CTTCT	1593
	GGCA	.CGTG	AC G	GACA	AGAT	C CT	ACCA	GCTA	CCA	CAGC	AAA	CGCC	TAAG	AG C	AGGA	TAAAA	1653
40	GTCT	GCCA	GG A	aagt	GTCC.	A GT	GTCC.	ACAT	GGC	CCCT	GGC	GCTC	TGAG	TC T	TTGA	GGAGT	1713
	AATC	GCAA	GC C	TCGT	TCAG	C TG	CAGC	AGAA	GGA	AGGG	CTT .	AGCC	AGGG	TG G	GCGC	TGGCG	1773
<b>4</b> 5	TCTG	TGTT	GA A	GGGA	AACC	A AG	CAGA	AGCC	ACT	GTAA	TGA '	TATG	TCAC	AA T	AAAA	CCCAT	1833
	C 4 4 F	~									<b>ተ</b> ሞር						1072

	(2)	IN	FORM	ATI0	N PO	R SE	Q ID	NO:	19:							
5			(i	´ (	A) B)	LENG Type	TH: : am	ACTE 430 ino : li	amin acid	o ac	ids					
10			(ii (ix)	F	EATU.	RE:		: pr FORM			prod	uct=	"mO	P1-P:	P"	
15			(xi	) S	EQUE	NCE :	DESC	RIPT	ION:	SEQ	ID	NO:1	9:			
	Het 1	His	Val	Arg	Ser 5	Leu	Arg	Ala	Ala	Ala 10	Pro	His	Ser	Phe	Val 15	Ala
20	Leu	Trp	Ala	Pro 20	Leu	Phe	Leu	Leu	Arg 25	Ser	Ala	Leu	Ala	Asp 30	Phe	Se
	Leu	Asp	Asn 35	Glu	Val	His	Sér	Ser 40	Phe	Ile	His	ATĞ	Arg 45	Leu	Arg	Sea
25	Gln	Glu 50	Arg	Arg	Glu	Het	Gln 55	Arg	Glu	Ile	Leu	Ser 60	Ile	Leu	Gly	Leu
	Pro 65	His	Arg	Pro	Arg	Pro 70	His	Leu	Gln	Gly	Lys 75	His	Asn	Ser	Ala	Pro 80
30	Het	Phe	Het	Leu	Asp 85	Leu	Tyr	Asn	Ala	Het 90	Ala	Val	Glu	Glu	Ser 95	Gly
35	Pro	Asp	Gly	Gln 100	Gly	Phe	Ser	Tyr	Pro 105	Tyr	Lys	Ala	Val	Phe 110	Ser	Thr
	Gln	Gly	Pro 115	Pro	Leu	Ala	Ser	Leu 120	Gln	Asp	Ser	His	Phe 125	Leu	Thr	Asp
40	Ala	Asp 130	Ket	Val	Het	Ser	Phe 135	Val	Asn	Leu	Val	Glu 140	His	Asp	Lys	Glu
	Phe 145	Phe	His	Pro	Arg	Tyr 150	His	His	Arg	Glu	Phe 155	Arg	Phe	Asp	Leu	Ser 160
45	Lys	Ile	Pro	Glu	Gly 165	Glu	Arg	Val	Thr	Ala 170	Ala	Glu	Phe	Arg	Ile 175	Туг
	Lys	Asp	Tyr 1	Ile 80	Arg	Glu	Arg	Phe	Asp 185	Asn	Glu	Thr	Phe	Gln 190	Ile	Thr
50	Val	Tyr	Gln 195	Val	Leu	Gln	Glu	His 200	Ser	Gly	Arg	Glu	Ser 205	Asp	Leu	Phe

	Leu	Leu 210	•	Ser	Arg	Thr	11e 215	Trp	Ala	Ser	Glu	Glu 220	Gly	Trp	Leu	Val
5	Phe 225	Asp	Ile	Thr	Ala	Thr 230	Ser	Asn	His	Trp	Val 235	Val	Asn	Pro	Arg	His 240
10	Asn	Leu	Gly	Leu	Gln 245	Leu	Ser	Val	Glu	Thr 250	Leu	Asp	Gly	Gln	Ser 255	Ile
10	Asn	Pro	Lys	Leu 260	Ala	Gly	Leu	Ile	Gly 265	Arg	His	Gly	Pro	Gln 270	Asn	Lys
15	Gln	Pro	Phe 275	Het	Val	Ala	Phe	Phe 280	Lys	Ala	Thr	Glu	Val 285	His	Leu	Arg
	Ser	Ile 290	Arg	Ser	Thr	Gly	Gly 295	Lys	Gln	Arg	Ser	Gln 300	Asn	Arg	Ser	Lys
20	Thr 305	Pro	Lys	Asn	Gln	Glu 310	Ala	Leu	Arg	Het	<b>Ala</b> 315	Ser	Val	Ala	Glu	Asn 320
	Ser	Ser	Ser	Asp	Gln 325	Arg	Gln	Ala	Cys	Lys 330	Lys	His	Glu	Leu	Tyr 335	Val
25	Ser	Phe	Arg	Asp 340	Leu	Gly	Trp	Gln	Asp 345	Trp	Ile	Ile	Ala	Pro 350	Glu	Gly
30	Tyr	Ala	Ala 355	Tyr	Tyr	Cys	Glu	Gly 360	Glu	Cys	Ala	Phe	Pro 365	Leu	Asn	Ser
	Tyr	<b>Het</b> 370	Asn	Ala	Thr	Asn	His 375	Ala	Ile	Val	Gln	Thr 380	Leu	Val	His	Phe
35	Ile 385	Asn	Pro	Asp	Thr	<b>Val</b> 390	Pro	Lys	Pro	Cys	Cys 395	Ala	Pro		G1n 00	Leu
	Asn	Ala	Ile	Ser	Val 405	Leu	Tyr	Phe	Asp	Asp 410	Ser	Ser	Asn	Val	Ile 415	Leu
40	Lys	Lys		Arg 20	Asn	Het	Val	Val	Arg 425	Ala	Cys	Gly	Cys	His 430		
	(2)	INF	ORMA	TION	FOR	SEQ	ID	NO:2	0:							
45		(i)	(A) (B)	LE TY	CHA NGTH PE: RAND	: 17 nucl	23 b eic	ase acid	pair	·s						
50			(D)		POLO											
		(ii	)HOL	ECUL	E TY	PE:	cDNA									

5	(∀1)ORIGINAL SOURCE: (A) ORGANISM: Homo sapiens (F) TISSUE TYPE: HIPPOCAMPUS	
5	<pre>(ix)FEATURE:   (A) NAME/KEY: CDS   (B) LOCATION: 4901696   (D) OTHER INFORMATION: /note= "hOP2 (cDNA)"</pre>	
10	(xi)SEQUENCE DESCRIPTION: SEQ ID NO:20:	
	GGCGCCGGCA GAGCAGGAGT GGCTGGAGGA GCTGTGGTTG GAGCAGGAGG TGGCACGGCA	60
15	GGGCTGGAGG GCTCCCTATG AGTGGCGGAG ACGGCCCAGG AGGCGCTGGA GCAACAGCTC	120
	CCACACCGCA CCAAGCGGTG GCTGCAGGAG CTCGCCCATC GCCCCTGCGC TGCTCGGACC	180
	GCGGCCACAG CCGGACTGGC GGGTACGGCG GCGACAGAGG CATTGGCCGA GAGTCCCAGT	240
20	CCGCAGAGTA GCCCCGGCCT CGAGGCGGTG GCGTCCCGGT CCTCTCCGTC CAGGAGCCAG	300
	GACAGGTGTC GCGCGGCGGG GCTCCAGGGA CCGCGCCTGA GGCCGGCTGC CCGCCCGTCC	360
<i>25</i>	CGCCCCGCCC CGCCGCCGC CGCCCGCCGA GCCCAGCCTC CTTGCCGTCG GGGCGTCCCC	420
	AGGCCCTGGG TCGGCCGCGG AGCCGATGCG CGCCCGCTGA GCGCCCCAGC TGAGCGCCCC	480
30	CGGCCTGCC ATG ACC GCG CTC CCC GGC CCG CTC TGG CTC CTG GGC CTG  Het Thr Ala Leu Pro Gly Pro Leu Trp Leu Leu Gly Leu  1 5 10	528
	GCG CTA TGC GCG CTG GGC GGG GGC CCC GGC CTG CGA CCC CCG CCC Ala Leu Cys Ala Leu Gly Gly Gly Gly Pro Gly Leu Arg Pro Pro 15 20 25	576
35	GGC TGT CCC CAG CGA CGT CTG GGC GCG CGC GAG CGC CGG GAC GTG CAG Gly Cys Pro Gln Arg Arg Leu Gly Ala Arg Glu Arg Arg Asp Val Gln 30 40 45	624
40	CGC GAG ATC CTG GCG GTG CTC GGG CTG CCT GGG CGG C	672
45	GCG CCA CCC GCC GCC TCC CGG CTG CCC GCG TCC GCG CCG C	720
50	CTG GAC CTG TAC CAC GCC ATG GCC GGC GAC GAC GAC GAG GAC GGC GCG Leu Asp Leu Tyr His Ala Het Ala Gly Asp Asp Asp Glu Asp Gly Ala 80 85 90	768

5			Glu										Het			GTT Val	816
		Met										Gln				TGG Trp 125	864
10															GCG Ala 140	GTC Val	912
15															CTG Leu		960
20															CAG Gln		1008
															CGA Arg		1056
25															GAC Asp		1104
30															GTG Val 220		1152
35															CTG Leu		1200
40															TTC Phe		1248
	GCC Ala	Ser	Pro	Ser	CCC Pro	Ile	Arg	Thr	Pro	Arg	Ala	Val	Arg	CCA Pro	CTG Leu	AGG Arg	1296
45	AGG Arg 270	AGG Arg	CAG Gln	CCG Pro	AAG Lys	AAA Lys 275	AGC Ser	AAC Asn	GAG Glu	CTG Leu	CCG Pro 280	CAG Gln	GCC Ala	AAC Asn	CGA Arg	CTC Leu 285	1344
50	CCA Pro														GTC Val 300		1392

5	CGT Arg	CGG	CAC His	GAG Glu 305	CTC Leu	TAC Tyr	GTC Val	AGC Ser	TTC Phe 310	Gln	GAC Asp	CTC Leu	GGC Gly	TGG Trp 315	CTG Leu	GAC Asp	1440
	TGG Trp	GTC Val	ATC Ile 320	GCT Ala	CCC Pro	CAA Gln	GGC Gly	TAC Tyr 325	TCG Ser	GCC Ala	TAT Tyr	TAC Tyr	TGT Cys 330	GAG Glu	GGG Gly	GAG Glu	1488
10	TGC Cys	TCC Ser 335	TTC Phe	CCA Pro	CTG Leu	GAC Asp	TCC Ser 340	TGC Cys	ATG Net	AAT Asn	GCC Ala	ACC Thr 345	AAC Asn	CAC His	GCC Ala	ATC Ile	1536
15	CTG Leu 350	CAG Gln	TCC Ser	CTG Leu	GTG Val	CAC His 355	CTG Leu	ATG Met	AAG Lys	CCA Pro	AAC Asn 360	GCA Ala	GTC Val	CCC Pro	AAG Lys	GCG Ala 365	1584
20	TGC Cys	TGT Cys	GCA Ala	CCC Pro	ACC Thr 370	AAG Lys	CTG Leu	AGC Ser	GCC Ala	ACC Thr 375	TCT Ser	GTG Val	CTC Leu	TAC Tyr	TAT Tyr 380	GAC Asp	1632
		AGC Ser															1680
25		TGC Cys	_			T G#	\GTC#	VGCC(	GC(	CCAGO	CCT	ACTO	GCAG				1723
30	(2)		ORMA														
<i>35</i>		<b>(i</b> )	SEQUAL (A)	LI	ingth Pe:	l: 40 amir	TERIS 12 am 10 ac 1ine	ino id		is							
		•	) MOI			PE:	prot	ein									
40		(i)	(A)	OTHE	:: IR IN	FOR	LATIC	)N: /	/proc	iuct=	hC	)P2-I	P"				
		•	•				•			D NO							
45	Met 1	Thr	Ala	Leu	Pro 5	Gly	Pro	Leu	Trp	Leu 10	Leu	Gly	Leu	Ala	Leu 15	Cys	
45	Ala	Leu	Gly	<b>Gly</b> 20	Gly	Gly	Pro	Gly	Leu 25	Arg	Pro	Pro	Pro	Gly 30	Cys	Pro	
50	Gln	Arg	Arg 35	Leu	Gly	Ala	Arg	Glu 40	Arg	Arg	Asp	Val	Gln 45	Arg	Glu	Ile	

	Leu	Ala 50		Leu	Gly	Leu	Pro 55	Gly	Arg	Pr	Arg	Pro 60	Arg	Ala	Pro	Pro
5	Ala 65	Ala	Ser	Arg	Leu	Pro 70	Ala	Ser	Ala	Pro	Leu 75	Phe	Het	Leu	Asp	Leu 80
10	Tyr	His	Ala	Het	Ala 85	Gly	Asp	Asp	Asp	Glu 90	Asp	Gly	Ala	Pro	Ala 95	Glu
	Arg	Arg	Leu	Gly 100	Arg	Ala	Asp	Leu	Val 105	Het	Ser	Phe	Val	Asn 110	Het	Val
15	Glu	Arg	Asp 115	Arg	Ala	Leu	Gly	His 120	Gln	Glu	Pro	His	Trp 125	Lys	Glu	Phe
	Arg	Phe 130	Asp	Leu	Thr	Gln	Ile 135	Pro	Ala	Gly	Glu	Ala 140	Val	Thr	Ala	Ala
20	Glu 145	Phe	Arg	Ile	Tyr	Lys 150	Val	Pro	Ser	Ile	His 155	Leu	Leu	Asn	Arg	Thr 160
25	Leu	His	Val	Ser	Met 165	Phe	Gln	Val	Val	Gln 170	Glu	Gln	Ser	Asn	Arg 175	Glu
25	Ser	Asp	Leu	Phe 180	Phe	Leu	Asp	Leu	Gln 185	Thr	Leu	Arg	Ala	Gly 190	Asp	Glu
30	Gly	Trp	Leu 195	Val	Leu	Asp	Val	Thr 200	Ala	Ala	Ser	Asp	Cys 205	Trp	Leu	Leu
	Lys	Arg 210	His	Lys	Asp	Leu	Gly 215	Leu	Arg	Leu	Tyr	Val 220	Glu	Thr	Glu	Asp
35	Gly 225	His	Ser	Val	Asp	Pro 230	Gly	Leu	Ala	Gly	Leu 235	Leu	Gly	Gln	Arg	Ala 240
	Pro	Arg	Ser	Gln	Gln 245	Pro	Phe	Val	Val	Thr 250	Phe	Phe	Arg	Ala	Ser 255	Pro
40	Ser	Pro	Ile	Arg 260	Thr	Pro	Arg	Ala	Val 265	Arg	Pro	Leu	Arg	Arg 270	Arg	Gln
45	Pro	Lys	Lys 275	Ser	Asn	Glu	Leu	Pro 280	Gln	Ala	Asn	Arg	Leu 285	Pro	Gly	Ile
		Asp 290	Asp	Val	His	Gly	Ser 295	His	Gly	Arg	Gln	Val 300	Cys	Arg	Arg	His
50	Glu 305	Leu	Tyr	Val	Ser	Phe 310	Gln	Asp	Leu	Gly	Trp 315	Leu	Asp	Trp	Val	Ile 320

	Ala	Pro	Gln	Gly	Tyr 325		Ala	Tyr	Tyr	Cys 330	Glu	Gly	Glu	Cys	Ser 335		
5	Pro	Leu	Asp	Ser 340		Met	Asn	Ala	Thr 345	Asn	His	Ala	Ile	<b>Leu</b> 350	Gln	Ser	
	Leu	Val	His 355	Leu	Het	Lys	Pro	Asn 360		Val	Pro	Lys	Ala 365	Cys	Cys	Ala	
10	Pro	Thr 370	Lys	Leu	Ser	Ala	Thr 375	Ser	Val	Leu	Tyr	Tyr 380	Asp	Ser	Ser	Asn	
15	Asn 385	Val	Ile	Leu	Arg	Lys 390	His	Arg	Asn	Het	Val 395	Val	Lys	Ala	Cys	Gly 400	
	Cys	His															
	(2)	IN	FORMA	TION	FOI	R SE	) ID	NO:2	22:								
20			(i)	(A	() 1 () 1	ENG:	CHARA TH: 1	926 :leic	base aci	pai d	īŝ						
				(C (D			DEDN LOGY:			gle							
25			(ii)	МО	LEC	JLE 1	TYPE:	cDN	<b>IA</b>								
30			( <b>vi</b> )	OR (A (F	) (	RGAN	OURC IISM: IE TY	HUE									
35			(ix)		) I	AME/ OCAT	KEY: ION: INF	93.	.128		ote=	"mO	P2 c	DNA"			
			(xi)	SE	QUEN	CE D	ESCR	IPTI	ON:	SEQ	ID N	0:22	:				
			GCCA	GGCA	CA G	GTGC	GCCG	T CT	GGTC	CTCC	CCG	TCTG	GCG '	TCAG	CCGA	GC	50
40	CCGA	CCAG	CT A	CCAG	TGGA	T GC	GCGC	CGGC	TGA	AAGT	CCG .				TG C et A		104
45	CCC (Pro (																152
50	GGC (	CAC (	GGT (	CCG ( Pro /	CGT Arg 25	CCC Pro	CCG ( Pro l	CAC . His	ACC :	TGT (Cys 1	CCC (	CAG ( Gln /	CGT (	CGC (	CTG Leu 35	GGA Gly	200

5	GCG Ala	CGC Arg	GAG Glu	CGC Arg 40	CGC Arg	GAC Asp	ATG Net	CAG Gln	CGT Arg 45	GAA Glu	ATC Ile	CTG Leu	GCG Ala	GTG Val 50	CTC Leu	GGG Gly	248
	CTA Leu	CCG Pro	GGA Gly 55	CGG Arg	CCC	CGA Arg	CCC	CGT Arg 60	GCA Ala	CAA Gln	CCC Pro	GCG Ala	GCT Ala 65	GCC Ala	CGG Arg	CAG Gln	296
10	CCA Pro	GCG Ala 70	TCC Ser	GCG Ala	CCC Pro	CTC Leu	TTC Phe 75	ATG Met	TTG Leu	GAC Asp	CTA Leu	TAC Tyr 80	CAC His	GCC Ala	ATG Het	ACC Thr	344
15	GAT Asp 85	GAC Asp	GAC Asp	GAC Asp	GGC Gly	GGG Gly 90	CCA Pro	CCA Pro	CAG Gln	GCT Ala	CAC His 95	TTA Leu	GGC Gly	CGT Arg	GCC Ala	GAC Asp 100	392
20	CTG Leu	GTC Val	ATG Het	AGC Ser	TTC Phe 105	GTC Val	AAC Asn	ATG Het	GTG Val	GAA Glu 110	CGC Arg	GAC Asp	CGT Arg	ACC Thr	CTG Leu 115	GGC Gly	440
	TAC Tyr	CAG Gln	GAG Glu	CCA Pro 120	CAC His	TGG Trp	AAG Lys	GAA Glu	TTC Phe 125	CAC His	TTT Phe	GAC Asp	CTA Leu	ACC Thr 130	CAĞ Gln	ATC Ile	488
25	CCT Pro	GCT Ala	GGG Gly 135	GAG Glu	GCT Ala	GTC Val	ACA Thr	GCT Ala 140	GCT Ala	GAG Glu	TTC Phe	CGG Arg	ATC Ile 145	TAC Tyr	AAA Lys	GAA Glu	536
30	CCC Pro	AGC Ser 150	ACC Thr	CAC His	CCG Pro	CTC Leu	AAC Asn 155	ACA Thr	ACC Thr	CTC Leu	CAC His	ATC Ile 160	AGC Ser	ATG Net	TTC Phe	GAA Glu	584
35	GTG Val 165	GTC Val	CAA Gln	GAG Glu	CAC His	TCC Ser 170	AAC Asn	AGG Arg	GAG Glu	TCT Ser	GAC Asp 175	TTG Leu	TTC Phe	TTT Phe	TTG Leu	GAT Asp 180	632
	CTT Leu	CAG Gln	ACG Thr	CTC Leu	CGA Arg 185	TCT Ser	GGG Gly	GAC Asp	GAG Glu	GGC Gly 190	TGG Trp	CTG Leu	GTG Val	CTG Leu	GAC Asp 195	ATC Ile	680
40	ACA Thr	GCA Ala	GCC Ala	AGT Ser 200	GAC Asp	CGA Arg	TGG Trp	CTG Leu	CTG Leu 205	AAC Asn	CAT His	CAC His	AAG Lys	GAC Asp 210	CTG Leu	GGA Gly	728
45	CTC Leu	CGC Arg	CTC Leu 215	TAT Tyr	GTG Val	GAA Glu	ACC Thr	GCG Ala 220	GAT Asp	GGG Gly	CAC His	AGC Ser	ATG Het 225	GAT Asp	CCT Pro	GGC Gly	776
50	Leu	GCT Ala 230	GGT Gly	CTG Leu	CTT Leu	GGA Gly	CGA Arg 235	CAA Gln	GCA Ala	CCA Pro	CGC Arg	TCC Ser 240	AGA Arg	CAG Gln	CCT Pro	TTC Phe	824

5	ATG GI Met Va 245	A ACC	TTC Phe	TTC Phe	AGG Arg 250	GCC Ala	AGC Ser	CAG Gln	AGT Ser	CCT Pro 255	GTG Val	CGG Arg	GCC Ala	CCT Pro	CGG Arg 260	872
	GCA GC Ala Al															920
10	CCG CA Pro Hi															968
15	CGC GG Arg Gl															1016
20	GAC CT Asp Le 31	u Gly														1064
	TAT TA Tyr Ty 325															1112
25	GCC AC Ala Th															1160
30	GAT GT Asp Va															1208
35	TCT GT Ser Va															1256
	CGT AAAAA Arg Ass	n Met									TGAG	GCCC	CCG (	CCAC	CATCC	1309
40	TGCTTC	TACT A	CCTI	ACCA	T CI	GGCC	GGGC	ccc	TCTC	CAG	AGGC	AGA	MC (	CIT	TATGT	1369
	TATCAT	AGCT (	AGAC	AGGG	G CA	ATGG	GAGG	ccc	TTCA	CTT	cccc	TGG	CA C	TTC	TGCTA	1429
	AAATTC	rggt (	TTTC	CCAG	T TC	CTCI	GICC	TTC	ATGG	GGT	TTCG	GGGC	TA 1	CAC	CCGCC	1489
45	CTCTCC	ATCC I	CCTA	cccc	A AG	CATA	GACT	GAA	TGCA	CAC	AGÇA	TCC	CAG A	GCTA	TGCTA	1549
	ACTGAG	AGGT C	TGGG	GTCA	.G CA	.CTGA	AGGC	CCA	CATO	AGG	AAGA	CTGA	ATC (	TTG	CCATC	1609
50	CTCAGC	CCAC A	ATGG	CAAA	T TC	TGGA	TGGT	CTA	AGAA	GGC	CGTG	GAA1	TC 1	AAA1	TAGAT	1669

	GAT	CTGG	GCT	CTCI	CCAC	CA I	TCAI	TGTG	G CA	GTTG	GGAC	ITA	TITA	GGT	AATA	CAGA	CA	1729
5	CAT	ACAC	ATT	GATC	AATG	CA I	CGCI	GTAC	T CC	TTGA	AATC	AGA	GCTA	GCT	TGTI	AGAA	AA	1789
5	AGA	ATCA	GAG	CCAG	GTAT	AG C	GGTG	CATG	T CA	AATT	TCCC	AGC	GCTA	AAG	AGAC	AGAG	AC	1849
	AGG	AGAA	TCT	CTGT	GAGT	TC A	AGGC	CACA	T AG	AAAG	AGCC	TGI	CTCG	GGA	GCAG	GAAA	AA	1909
10	AAA	AAAA	AAC	GGAA	TTC													1926
	(2)	IN	FORM	OITA	N FO	R SE	Q ID	NO:	23:									
15			(1	(	B)	LENG TYP	TH:	399 amin	amin o ac	o ac id	ids							-
			(ii	) H	OLEC	ULE	TYPE	: pr	otei	n								
20			(ix)		<b>EATU</b> I		R IN	Form	ATIO	N: /:	prod	uct=	"mO	P2-P	P"			
			(xi	•	EQUEI						-							
25	Met 1	Ala	Het	Arg	Pro 5	Gly	Pro	Leu	Trp	Leu 10	Leu	Gly	Leu	Ala	Leu 15	Cys		
	Ala	Leu	Gly	Gly 20	Gly	His	Gly	Pro	Arg 25	Pro	Pro	His	Thr	Cys 30	Pro	Gln		
30	Arg	Arg	Leu 35	Gly	Ala	Arg	Glu	Arg 40	Arg	Asp	Het	Gln	Arg 45	Glu	Ile	Leu	Ala	
35	Val 50	Leu	Gly	Leu	Pro	Gly 55	Arg	Pro	Arg	Pro	Arg 60	Ala	Gln	Pro	Ala	Ala 65		
	Ala	Arg	Gln	Pro	Ala 70	Ser	Ala	Pro	Leu	Phe 75	Het	Leu	Asp	Leu	Tyr 80	His	Ala	
40	Het	Thr	Asp 85	Asp	Asp	Asp	Gly	Gly 90	Pro	Pro	Gln	Ala	His 95	Leu	Gly	Arg		
	Ala	Asp 100	Leu	Val	Het		Phe 105				Val			Asp	Arg	Thr		
45	Leu 115	Gly	Tyr	Gln	Glu	Pro 120	His	Trp	Lys	Glu	Phe 125	His	Phe	Asp	Leu	Thr 130		
50	Gln	Ile	Pro	Ala	Gly 135	Glu	Ala	Val	Thr	Ala 140	Ala	Glu	Phe	Arg	Ile 145	Tyr		

	Lys	Glu	Pro	Ser 150	Thr	His	Pro	Leu	Asn 155	Thr	Thr	Leu	His	Ile 160	Ser	Het
5	Phe	Glu	Val 165	Val	Gln	Glu	His	Ser 170	Asn	Arg	Glu	Ser	<b>Asp</b> 175	Leu	Phe	Phe
10	Leu	Asp 180	Leu	Gln	Thr	Leu	Arg 185	Ser	Gly	Asp	Glu	Gly 190	Trp	Leu	Val	Leu
	<b>Asp</b> 195	Ile	Thr	Ala	Ala	Ser 200	Asp	Arg	Trp	Leu	Leu 205	Asn	His	His	Lys	Asp 210
15	Leu	Gly	Leu	Arg	Leu 215	Tyr	Val	Glu	Thr	Ala 220	Asp	Gly	His	Ser	<b>Met</b> 225	Asp
	Pro	Gly	Leu	Ala 230	Gly	Leu	Leu	Gly	Arg 235	Gln	Ala	Pro	Arg	Ser 240	Årg	Gln
20	Pro	Phe	<b>Met</b> 245	Val	Thr	Phe	Phe	Arg 250	Ala	Ser	Gln	Ser	Pro 255	Val	Arg	Ala
25	Pro	Arg 260	Ala	Ala	Arg	Pro	Leu 265	Lys	Arg	Arg	Gln	Pro 270	Lys	Lys	Thr	Asn
25	Glu 275	Leu	Pro	His	Pro	Asn 280	Lys	Leu	Pro	Gly	Ile 285	Phe	Asp	Asp	Gly	His 290
30	Gly	Ser	Arg	Gly	Arg 295	Glu	Val	Cys	Arg	Arg 300	His	Glu	Leu	Tyr	Val 305	Ser
	Phe	Arg	Asp	Leu 310	Gly	Trp	Leu	Asp	Trp 315	Val	Ile	Ala	Pro	Gln 320	Gly	Tyr
35	Ser	Ala	Tyr 325	Tyr	Cys	Glu	Gly	Glu 330	Cys	Ala	Phe	Pro	Leu 335	Asp	Ser	Cys
	Het	<b>Asn</b> 340	Ala	Thr	Asn	His	Ala 345	Ile	Leu	Gln	Ser	Leu 350	Val	His	Leu	Het
40	Lys 355	Pro	Asp	Val	Val	Pro 360	Lys	Ala	Cys	Cys	Ala 365	Pro	Thr	Lys	Leu	Ser 370
45	Ala	Thr	Ser	Val	Leu 375	Tyr	Tyr	Asp	Ser	Ser 380	Asn	Asn	Val	Ile	Leu 385	Arg
	Lys	His	Arg	Asn 390	Het	Val	Val	Lys	Ala 395	Cys	Gly	Cys	His			

	(2)	11	VFOR	LATIC	IN PC	R SE	iQ II	NO:	24:									
5			t)	· (	A) L B) T C) S	engi Ype: Tran	H: 1 nuc DEDN	ACTE 368 leic ESS: lin	base aci sin	pai d								
10			(ii	.) H	OLEC	ULE	TYPE	: cD	NA									
15			(ix	(	B) L	AME/ OCAT	ION:	CDS 1 ORMA	1368		'ANDA	RD N	ame=	<b>"60</b> A	, m			
			(x	) <b>P</b>	A) A	UTHO	RS:		RTON	, KR	ISTI	A.;	THO	HSEN	, GE	RALD	н.;	
20				(	B) T C) J D) V	ITLE OURN OLUH	: DR Al: E: 8	OSOP PRO 8	HILA C. N	60A AT'L	ACA	D. S						
25			/ <b>v</b> 4	Ò	F) P. G) D.	AGES ATE:	: 92 OCT	14-9 - 1	218 991		·			FRO	Н 1	TO 13	368	
		=00	•	-						·								
30	-			Leu										_		TCC Ser		48
35				GGA Gly 20												CCG Pro		96
				GCC Ala												GAC Asp		144
40				ATG Net														192
45				ATC Ile														240
50			Ser	CAC His	Gln	Leu	Ser	Leu	Arg	Lys	Ser	Ala	Pro	Lys	Phe			288

5	CTG Leu	GAC Asp	GTC Val	TAC Tyr 100	His	CGC Arg	ATC Ile	ACG Thr	GCG Ala 105	GAG Glu	GAG Glu	GGT Gly	CTC Leu	AGC Ser 110	GAT Asp	CAG Gln	336
					GAC Asp												384
10					GAT Asp												432
15					GCC Ala												480
20					CAC His 165												528
					GAC Asp												576
25					CGC Arg												624
30					GAG Glu												672
35	ACG Thr 225				CAC His												720
•	GGG Gly																768
40	GAG Glu		Leu														816
45	CAC His	Ala															864
50	CTG Leu																912

5		Phe				GAG Glu 310									960
						AGC Ser									1008
10					Asn	GTG Val									1056
15						ACC Thr									1104
20						GCA Ala									1152
						CCG Pro 390									1200
25						CTG Leu									1248
30						CCG Pro									1296
35						AAT Asn									1344
40						TGC Cys		TGA							1368
	(2)	INF	ORMA	TION	FOR	SEQ	ID	NO:2	5:						
45			( <b>i</b> )	(A (B	) LE	ICE C NGTH PE: POLO	: 45 amin	5 am o ac	ino 1d	CS: acid	s				
			(ii)	HO	LECU	LE T	YPE:	pro	tein						
50			(xi)	SE	QUEN	CE D	ESCR	IPTI	ON:	SEQ	ID N	0:25	:		

	Het 1	: Ser	Gly	Leu	Arg 5	Asn	Thr	Ser	Glu	Ala 10		Ala	Val	Leu	Ala 15	
5	Leu	Gly	Leu	Gly 20		Val	Leu	Leu	Met 25		Val	Ala	Thr	Thr 30	Pro	Pro
10	Ala	Val	Glu 35		Thr	Gln	Ser	Gly 40	Ile	Tyr	Ile	Asp	Asn 45	Gly	Lys	Asp
	Gln	Thr 50	Ile	Het	His	Arg	Val 55	Leu	Ser	Glu	Asp	Asp 60	Lys	Leu	Asp	Val
15	Ser 65		Glu	Ile	Leu	Glu 70	Phe	Leu	Gly	Ile	Ala 75	Glu	Arg	Pro	Thr	His 80
	Leu	Ser	Ser	His	Gln 85	Leu	Ser	Leu	Arg	<b>Lys</b> 90	Ser	Ala	Pro	Lys	Phe 95	Leu
20	Leu	Asp	Val	Tyr 100	His	Arg	Ile	Thr	Ala 105	Glu	Glu	Gly	Leu	Ser 110	Asp	Gln
25	Asp	Glu	Asp 115	Asp	Asp	Tyr	Glu	Arg 120	Gly	His	Arg	Ser	Arg 125	Arg	Ser	Ala
	Asp	Leu 130	Glu	Glu	Asp	Glu	Gly 135	Glu	Gln	Gln	Lys	Asn 140	Phe	Ile	Thr	Asp
30	Leu 145	Asp	Lys	Arg	Ala	Ile 150	Asp	Glu	Ser	Asp	Ile 155	Ile	Het	Thr	Phe	Leu 160
	Asn	Lys	Arg	His	His 165	Asn	Val	Asp	Glu	<b>Leu</b> 170	Arg	His	Glu	His	<b>Gly</b> 175	Arg
35	Arg	Leu	Trp	Phe 180	Asp	Val	Ser	Asn	Val 185	Pro	Asn	Asp	Asn	Tyr 190	Leu	Val
	Met	Ala	Glu 195	Leu	Arg	Ile	Tyr	Gln 200	Asn	Ala	Asn	Glu	Gly 205	Lys	Trp	Leu
•	Thr	Ala 210	Asn	Arg	Glu	Phe	Thr 215	Ile	Thr	Val	Tyr	Ala 220	Ile	Gly	Thr	Gly
45	Thr 225	Leu	Gly	Gln		Thr 230	Het	Glu	Pro	Leu	Ser 235	Ser	Val	Asn	Thr	Thr 240
	Gly	Asp	Tyr	Val	Gly 245	Trp	Leu	Glu	Leu	Asn 250	Val	Thr	Glu	Gly	<b>Leu</b> 255	His
50	Glu	Trp		Val 260	Lys	Ser	Lys	Asp	Asn 265	His	Gly	Ile	Tyr	Ile 270	Gly	Ala

	His	Ala	Val 275	Asn	Arg	Pro	Asp	Arg 280	Glu	Val	Lys	Leu	<b>Asp</b> 285	Asp	Ile	Gly
5	Leu	Ile 290	His	Arg	Lys	Val	Asp 295	Asp	Glu	Phe	Gln	Pro 300	Phe	Het	Ile	Gly
10	Phe 305	Phe	Arg	Gly	Pro	Glu 310	Leu	Ile	Lys	Ala	Thr 315	Ala	His	Ser	Ser	His 320
	His	Arg	Ser	Lys	Arg 325	Ser	Ala	Ser	His	Pro 330	Arg	Lys	Arg	Lys	Lys 335	Ser
15	Val	Ser	Pro	Asn 340	Asn	Val	Pro	Leu	Leu 345	Glu	Pro	Het	Glu	Ser 350	Thr	Arg
	Ser	Cys	Gln 355	Het	Gln	Thr	Leu	Tyr 360	Ile	Asp	Phe	Lys	<b>Asp</b> 365	Leu	Gly	Trp
20	His	<b>Asp</b> 370	Trp	Ile	Ile	Ala	Pro 375	Glu	Gly	Tyr	Gly	Ala 380	Phe	Tyr	Cys	Ser
	Gly 385	Glu	Cys	Asn	Phe	Pro 390	Leu	Asn	Ala	His	Het 395	Asn	Ala	Thr	Asn	His 400
25	Ala	Ile	Val	Gln	Thr 405	Leu	Val	His	Leu	Leu 410	Glu	Pro	Lys	Lys	Val 415	Pro
30	Lys	Pro	Cys	Cys 420	Ala	Pro	Thr	Arg	<b>Leu</b> 425	Gly	Ala	Leu	Pro	Val 430	Leu	Tyr
	His	Leu	Asn 435	Asp	Glu	Asn	Val	Asn 440	Leu	Lys	Lys	Tyr	Arg 445	Asn	Het	Ile
35	Val	Lys 450	Ser	Cys	Gly	Cys	His 455									
	(2)	INFO	RMAT	ION	FOR	SEQ	ID N	10:26	:							
40			(i)	(A (B		ngth Pe:	: am amin	ino o ac								
45			•					_	tein							
		(	<b>iii</b> )	OR (A	IGIN ) OR	AL S GANI	OURC Sh:	E: Homo	Sap	iens						
50			(ix)	(A (B	ATUR ) NA ) LO ) OT	ME/K CATI	ON:	11		/no	te="	BMP3	<b>77</b>			

		(:	X1)	SEQ	UENC	E DE	SCKI	P110	N: 5	EŲ I	טא ע	:20:					
5			EQUE (A) (B) (C) (D)	LEN TYP STR	GTH:	10 amin DNES	4 am o ac	ino id sing	_	s							
10		(ii)l	HOLE	CULE	TYP	<b>E:</b> 1	prot	ein									
15		į		NAM:	E/KE ATIO ER I	N: .	Proto ll	04	/no	te="	вирз	<b>.</b>					
		(xi)	SEQU	ENCE	DES	CRIP'	TION	: S	EQ I	D NO	:26:						
20	Cys Ala Arg Arg Tyr Leu Lys Val Asp Phe Ala Asp Ile Gly Trp Ser 1 5 10 15  Glu Trp Ile Ile Ser Pro Lys Ser Phe Asp Ala Tyr Try Cys Ser Gly 20 25 30  Ala Cys Gln Phe Pro Met Pro Lys Ser Leu Lys Pro Ser Asn His Ala															Ser	
		Glu	Trp	Ile		Ser	Pro	Lys	Ser		Asp	Ala	Tyr	Try		Ser	Gly
25		Ala	Cys	Gln 35	Phe	Pro	Het	Pro	Lys 40	Ser	Leu	Lys	Pro	Ser 45	Asn	His	Ala
		Thr	Ile 50	Gln	Ser	Ile	Val	Ala 55	Arg	Ala	Val	Gly	Val 60	Val	Pro	Gly	Ile
30		Pro 65	Glu	Pro	Cys	Cys	Val 70	Pro	Glu	Lys	Het	Ser 75	Ser	Leu	Ser	Ile	Leu 80
35		Phe	Phe	Asp	Glu	Asn 85	Lys	Asn	Val	Val	Leu 90	Lys	Val	Tyr	Pro	Asn 95	Met
		Thr	Val	Glu	Ser 100	Cys	Ala	Cys	Arg								
40	(2)	INFORM	ITAI	N FO	OR SI	EQ II	) NO:	27:									
<b>4</b> 5		(	i)	(A) (B) (C)	JENCI LENC TYPI STRA TOPO	STH: E: an INDEI	102 nino NESS	amin acio S: s:	no ad i ingle	ids							
		( <b>i</b>	. <b>i</b> )	MOLE	CULI	E TYP	PE: p	rote	ein								
50		(∇	ri)		INAI ORG <i>i</i>				SAPII	ens							

5			(ix	( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( ( (	B) L	RE: AME/ OCAT THER	ION:	1	102	: /n	ote=	"BK	P5*			
			(xi	) Si	eque	NCE !	DESC	RIPT	ION:	SEQ	ID 1	NO:2	7:			
10	Cys 1	Lys	Lys	His	Glu 5	Leu	Tyr	Val	Ser	Phe 10	Arg	Asp	Leu	Gly	Trp 15	Gln
	Asp	Trp	Ile	Ile 20	Ala	Pro	Glu	Gly	Tyr 25	Ala	Ala	Phe	Tyr	Cys 30	Asp	Gly
15	Glu	Cys	Ser 35	Phe	Pro	Leu	Asn	Ala 40	His	Het	Asn	Ala	Thr 45	Asn	His	Ala
20	Ile	Val 50	Gln	Thr	Leu	Val	His 55	Leu	Net	Phe	Pro	Asp 60	His	Val	Pro	Lys
-	Pro 65	Cys	Сул	Ala	Pro	Thr 70	Lys	Leu	Asn	Ala	Ile 75	Ser	Val	Leu	Tyr	Phe 80
25	Asp	Asp	Ser	Ser	Asn 85	Val	Ile	Leu	Lys	Lys 90	Tyr	Arg	Asn	Het	Val 95	Val
	Arg	Ser	Cys	Gly 100	Cys	His										
30	(2)	INFO	RHAT	ION	FOR	SEQ	ID N	10:28	<b>:</b> :							
35			(i)	(A (B (C	) LE ) TY :) S1	ICE C INGTH IPE: IRANE IPOLO	: 10 amin EDNE	2 am 10 ac ISS:	ino id sing	acid	ls					
			(ii)	•		LE I				l.						
40			( <b>vi</b> )			IAL S GANI			SAP	IENS	;					
45			(ix)	(A (B	) LO	e: Me/k Cati Her	ON:	11	02	/no	te=	"BMP	6"			
			(xi)	SE	QUEN	CE D	ESCR	IPTI	ON:	SEQ	ID N	0:28	:			
50	Cys 1	Arg	Lys		Glu 5	Leu	Tyr	Val	Ser	Phe 10	Gln	Asp	Leu	Gly	Trp 15	Gln

	Asp	Trp	Ile	Ile 20	Ala	Pro	Lys	Gly	Tyr 25	Ala	Ala	Asn	Tyr	Cys 30	Asp	Gly
5	Glu	Cys	Ser 35	Phe	Pro	Leu	Asn	Ala 40	His	Met	Asn	Ala	Thr 45	Asn	His	Ala
	Ile	Val 50	Gln	Thr	Leu	Val	His 55	Leu	Het	Asn	Pro	Glu 60	Tyr	Val	Pro	Lys
10	Pro 65	Cys	Cys	Ala	Pro	Thr 70	Lys	Leu	Asn	Ala	Ile 75	Ser	Val	Leu	Tyr	Phe 80
15	Asp	Asp	Asn	Ser	Asn 85	Val	Ile	Leu	Lys	Lys 90	Tyr	Arg	Trp	Het	Val 95	Val
	Arg	Ala	Cys	Gly 100	Cys	His										
20	(2)	INFO	RMAT	CION	FOR	SEQ	ID N	10:29	:							
25			(i)	( <i>A</i>	LE I) IY	NGTH PE:	HARA I: 10 amin GY:	2 an	ino id		ls					
20			(ii)	MO	LECU	LE I	YPE:	pro	tein	ı						
30			(ix)	(A (B	) LO ) OT / S	ME/K CATI HER note ELEC	TED	11 RMAT HERE FROM	02 ION: IN X THE	AA A	T EA	CH P	OS'N	ING	AT I	PENDENTLY HE UENCE OF HOUSE
35					0	r hu	HAN ,20	OP 1	or o	P2 (	SEE	SEQ.	ID	NOS.	5,6	,7 and 8 or
			(xi)	SE	QUEN	CE D	ESCR	IPTI	ON:	SEQ	ID N	0:29	:			
40	Cys l	Xaa	Xaa		Glu 5	Leu	Tyr	Val		Phe 10	Xaa	Asp	Leu	-	Trp 15	Xaa
	Asp	Trp		Ile . 20	Ala	Pro :	Xaa (		Tyr 25	Xaa	Ala	Tyr		Cys 30	Glu	Gly
45	Glu	Cys	<b>Xaa</b> 3	Phe	Pro	Leu :		Ser 40	Xaa	Het	Asn		Thr 45	Asn	His	Ala
50		Xaa ( 50	Gln :	Xaa :	Leu '		His : 55	Xaa :	Xaa :	Xaa		<b>Xaa</b> :	Xaa	Val	Pro	Lys

	Iaa Cy 65	s Cys	Ala	Pro	Thr 70	Xaa	Leu	Xaa	Ala	<b>Xaa</b> 75	Ser	Val	Leu	Tyr	<b>Xaa</b> 80
5	Asp Xa	a Ser	Iaa	Asn 85	Val	Xaa	Leu	Xaa	Lys 90	Xaa	Arg	Asn	Het	• <b>Val</b> 95	Val
	Xaa Al	a Cys	Gly 100	Cys	His										
10	(2) I	NFORM	ATIO	FOR	SEC	) ID	NO: 3	10:							
	(	i)SEQ (A (B	) LI		l: 9	7 an	TICS ino icids	acio	is						
15	•	(C ii)MO ix)FE	) T( LECUI	POLO E TY	GY:	lin	ear								
20	,	(A (D	) NA	ME: HER	INFO	RMAI		vi	ierei						endently
							s spe				or mc	ore s	spec.	LIEC	l amino acids as
	(	xi)SE	QUENC	E DE	SCRI	PTIO	N:	SEQ	ID N	iO:30	):				
25	L	eu Xa	a Xaa l	Xaa	Phe	5									
	X	aa Xa	a Xaa	Gly	Trp 10	Iaa	Xaa	Trp	Xaa	•					
30		aa Xaa 15	_		20	_	_	_							
		aa Ty:	5		•	30			,						
		aa Pro			35	_		_							
35		aa Xaa 4(	) _		_	_	45	_							
		aa Xaa			50										
40		aa Xaa 59	5		_	_	_60	_							
		ys Xaa aa Xaa	65		_	_	_	AGO	•						
	•	70 aa Xaa		_		75		Yaa							
45		aa Xaa		80											
		85			!	90	141	AGG	•						
	X.	aa Cys		cys	ABA										

	(2) INFOR	EATION FOR SEQ ID NO:	31:
5	(A (E (C	QUENCE CHARACTERISTICS  1) LENGTH: 102 amino  3) TYPE: amino acid:  1) TOPOLOGY: linear  1) LECULE TYPE: protein	o acids s
10	(ix)FE	ATURE: A) NAME: Generic Sequ D) OTHER INFORMATION:	uence 6 : vherein each <b>Xaa</b> is independently roup of one or more specified amino acids as
	(xi) SE	QUENCE DESCRIPTION:	SEQ ID NO:31:
15	Cys Xaa	. Xaa Xaa Xaa Leu Xaa	Xaa Xaa Phe
	Xaa Xaa	Xaa Gly Trp Xaa Xaa	
	Xaa Xaa 20	Pro Xaa Xaa Xaa Xaa	Ala
20		Cys Xaa Gly Xaa Cys	Xaa 35
	Xaa Pro	Xaa Xaa Xaa Xaa 40	
	Xaa Xaa	Xaa Asn His Ala Xaa	Xaa 50
25	Xaa Xaa	Xaa Xaa Xaa Xaa Xaa 55	Iaa
	Xaa Xaa 60	Xaa Xaa Xaa Xaa 65	Cys
30	Cys Xaa	Pro Xaa Xaa Xaa Xaa 70	Xaa
	<b>Xaa Xaa</b> 75	Xaa Leu Xaa Xaa Xaa 80	
	Xaa Xaa	Xaa Xaa Val Xaa Leu : 85	Xaa
35	<b>Xaa Xaa</b> 90	Xaa Xaa Het Xaa Val 3	Xaa
	Xaa Cys	Xaa Cys Xaa 100	
	(2) INFO	RMATION FOR SEQ ID NO	:32:
40	(i) (A) (B) (C) (D)	SEQUENCE CHARACTER! LENGTH: 1238 base po TYPE: nucleic acid, STRANDEDNESS: single TOPOLOGY: linear	airs, 372 amino acids amino acid
45	( <b>ii</b> )	HOLECULE TYPE: cDNA	

5	(A) (F) (iv) (A)	ORIGINAL SOUR ORGANISM: hum TISSUE TYPE: FEATURE: NAME/KEY: CDS	an BRAIN		
10	(B) (D)		TION: t= "GDF-1" "GDF-1 CDNA"		
15	(x) (A) (B) (C) (D) (E) (F)	PUBLICATION I AUTHORS: Lee, TITTLE: Expre JOURNAL: Proc VOLUME: 88 RELEVANT RESI PAGES: 4250-4	Se-Jin ssion of Gro . Nat'l Acad DUES: 1-123		on Factor 1
20	(G) (xi)	DATE: Hay-19 SEQUENCE DESC	91	ID NO:32:	
	GGGGACACCG G	CCCCGCCCT CAGC	CCACTG GTCCC	GGGCC GCCGCGGACC	CTGCGCACTC 60
25	TCTGGTCATC G	1		CCG CAG CAA GGT C Pro Gln Gln Gly P	
30				CTG CTG CTG CCC Leu Leu Leu Pro	
35	CTG A( Leu Tì	CC CGC GCC CCC hr Arg Ala Pro 30	GTG CCC CCA Val Pro Pro	GGC CCA GCC GCC ( Gly Pro Ala Ala 2 35	GCC CTG CTC 203 Ala Leu Leu 40
35				CCC CAG GGT GCC ( Pro Gln Gly Ala 1 50	
40				CGC CTG TTT CGA (Arg Leu Phe Arg 65	
45	CCC CA Pro Gl	AG GAG ACC AGG In Glu Thr Arg 75	TCT GGC TCG Ser Gly Ser	CGG CGG ACG TCC (Arg Arg Thr Ser )	CCA GGG GTC 338 Pro Gly Val 85
	ACC CI Thr Le	CG CAA CCG TGC eu Gln Pro Cyc 90	CAC GTG GAG His Val Glu	GAG CTG GGG GTC GGlu Leu Gly Val A	GCC GGA AAC 383 Ala Gly Asn 100
50					

5	ATC Ile	GTG Val	CGC Arg	CAC His	ATC Ile 105	CCG Pro	GAC Asp	CGC Arg	GCT Gly	GCG Ala 110	CCC Pr	ACC Thr	CGG Arg	GCC Ala	TCG Ser 115	428
													ACA Thr			473
10													AGC Ser			518
15													GCC Ala			563
	GGC Gly															608
	GCG Ala															653
	GGG Gly														Arg	698
					195					200					205	
	AAC Asn															743
35	CCC Pro	CGG Arg	GCC Ala	CCT Pro	GCC Ala 225	GCC Ala	TGC Cys	GCG Ala	CGC Arg	CTG Leu 230	GCC Ala	GAG Glu	GCC Ala	TCG Ser	CTG Leu 235	788
	CTG Leu															833
45	CCG Pro	CGG Arg	CGC Arg	GAC Asp	GCC Ala 255	GAA Glu	CCC Pro	GTG Val	TTG Leu	GGC Gly 260	GGC Gly	GGC Gly	CCC Pro	GGG Gly	GGC Gly 265	878
	GCT Ala	TGT Cys	CGC Arg	GCG Ala	CGG Arg 270	CGG Arg	CTG Leu	TAC Tyr	GTG Val	AGC Ser 275	TTC Phe	CGC Arg	CAG Glu	GTG Val	GGC Gly 280	923
	TGG Trp															968

5		TGC CAG GGT CAG TGC GCG CTG CCC GTC GCG CTG TCG GGG TCC GGG  Cys Gln Gly Gln Cys Ala Leu Pro Val Ala Leu Ser Gly Ser Gly  300 305 310
		GGG CCG CCG GCG CTC AAC CAC GCT GTG CTG CGC GCG CTC ATG CAC Gly Pro Pro Ala Leu Asn His Ala Val Leu Arg Ala Leu Het His 315 320 325
10		GCG GCC GCC CCG GGA GCC GCC GAC CTG CCC TGC TGC GTG CCC GCG 1103  Ala Ala Ala Pro Gly Ala Ala Asp Leu Pro Cys Cys Val Pro Ala 330 335 340
15		CGC CTG TCG CCC ATC TCC GTG CTC TTC TTT GAC AAC AGC GAC AAC AGR Leu Ser Pro Ile Ser Val Leu Phe Phe Asp Asn Ser Asp Asn 355
20		GTG GTG CTG CGG CAG TAT GAG GAC ATG GTG GTG GAC GAG TGC GGC Val Val Leu Arg Gln Tyr Glu Asp Het Val Val Asp Glu Cys Gly 360 370
		TGC CGC TAACCCGGGG CGGGCAGGGA CCCGGGCCCA ACAATAAATG CCGCGTGG 1238 Cys Arg 372
25	(2)	INFORMATION FOR SEQ ID NO:33:
30		(i) SEQUENCE CHARACTERISTICS:  (A) LENGTH: 372 amino acids  (B) TYPE: amino acid  (C) STRANDEDNESS: single  (D) TOPOLOGY: linear
		(ii) MOLECULE TYPE: cDNA
35		(111) HYPOTHETICAL: NO
		(iv) ANTI-SENSE: NO
40		(vi) ORIGINAL SOURCE: (A) ORGANISH: human (F) TISSUE TYPE: BRAIN
45		<pre>(ix) FEATURE:     (A) NAME/KEY: CDS     (B) LOCATION:     (D) OTHER INFORMATION: /function=</pre>
50		(x1) SEQUENCE DESCRIPTION: SEQ ID NO:33:  Met Pro Pro Pro Gln Gln Gly Pro Cys Gly 1 5 10
		-

	His	His	Leu	Leu	Leu 15	Leu	Leu	Ala	Leu	Leu 20	Leu	Pro	Ser	Leu	Pro 25
5	Leu	Thr	Arg	Ala	Pro 30	Val	Pro	Pro	Gly	Pro 35	Ala	Ala	Ala	Leu	Leu 40
10	Gln	Ala	Leu	Gly	Leu 45	Arg	Asp	Glu	Pro	Gln 50	Gly	Ala	Pro	Arg	Leu 55
	Arg	Pro	Val	Pro	Pro 60	Val	Met	Trp	Arg	Leu 65	Phe	Arg	Arg	Arg	Asp 70
15	Pro	Gln	Glu	Thr	Arg 75	Ser	Gly	Ser	Arg	Arg 80	Thr	Ser	Pro	Gly	<b>Val</b> 85
	Thr	Leu	Gln	Pro	Сус 90	His	Val	Glu	Glu	Leu 95	Gly	Val	Ala	Gly	Asn 100
20	Ile	Val	Arg	His	Ile 105	Pro	Asp	Arg	Gly	Ala 110	Pro	Thr	Arg	Ala	Ser 115
	Glu	Pro	Val	Ser	Ala 120	Ala	Gly	His	Cys	Pro 125	Glu	Trp	Thr	Val	Val 130
25	Phe	Asp	Leu	Ser	Ala 135	Val	Glu	Pro	Ala	Glu 140	Arg	Pro	Ser	Arg	Ala 145
30	Arg	Leu	Glu	Leu	Arg 150	Phe	Ala	Ala	Ala	Ala 155	Ala	Ala	Ala	Pro	Glu 160
	Gly	Gly	Trp	Glu	Leu 165	Ser	Val	Ala	Gln	Ala 170	Gly	Gln	Gly	Ala	Gly 175
35	Ala	Asp	Pro	Gly	Pro 180	Val	Leu	Leu	Arg	Gln 185	Leu	Val	Pro	Ala	Leu 190
	Gly	Pro	Pro	Val	Arg 195	Ala	Glu	Leu	Leu	Gly 200	Ala	Ala	Trp	Ala	Arg 205
40	Asn	Ala	Ser	Trp	Pro 210	Arg	Ser	Leu	Arg	Leu 215	Ala	Leu	Ala	Leu	Arg 220
45	Pro	Arg	Ala	Pro	Ala 225	Ala	Cys	Ala	Arg	Leu 230	Ala	Glu	Ala	Ser	Leu 235
	Leu	Leu	Val		Leu 240	Asp	Pro	Arg	Leu	Cys 245	His	Pro	Leu	Ala	Arg 250
50	Pro	Arg	Arg	Asp	Ala 255	Glu	Pro	Val	Leu	Gly 260	Gly	Gly	Pro	Gly	Gly 265

Ala Cys Arg Ala Arg Arg Leu Tyr Val Ser Phe Arg Glu Val Gly 5 Trp His Arg Trp Val Ile Arg Pro Arg Gly Phe Leu Ala Asn Cys Gln Gly Gln Cys Ala Leu Pro Val Ala Leu Ser Gly Ser Gly 310 10 Gly Pro Pro Ala Leu Asn His Ala Val Leu Arg Ala Leu Met His Ala Ala Ala Pro Gly Ala Ala Asp Leu Pro Cys Cys Val Pro Ala 15 340 Arg Leu Ser Pro Ile Ser Val Leu Phe Phe Asp Asn Ser Asp Asn 355 20 Val Val Leu Arg Gln Tyr Glu Asp Met Val Val Asp Glu Cys Gly Cys Arg **37**2 25

30 Claims

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- Use of a morphogen comprising a dimeric protein that induces tissue-specific morphogenesis in a mammal (eg a human) and comprises a pair of folded polypeptides, the amino acid sequence of each of which comprises a sequence sharing at least 70% amino acid sequence homology with the C-terminal seven cysteine domain of human OP-1 (residues 38-139 of Seq. ID No. 5), for the manufacture of a medicament for:
  - (a) modulating an inflammatory response; or
  - (b) alleviating the tissue destructive effects associated with the inflammatory response to tissue injury; or
  - (c) enhancing the viability of injured or damaged mammalian tissue (eg tissue disposed in vivo in a mammal).
- Use according to claim 1 for modulating an inflammatory response in mammalian tissue, wherein the modulation of said inflammatory response comprises:
  - (a) alleviation of fibrosis or scar tissue formation; and/or
  - (b) inhibition of adherence of immune effector cells to vascular endothelium; and/or
  - (c) alleviation of interstitial inflammation; and/or
  - (d) alleviation of edema or erythema; and/or
  - (e) alleviation of inflammatory tissue necrosis.
- 50 3. Use according to claim 1 or claim 2 wherein the inflammatory response is associated with tissue injury (the injury for example being chemically, mechanically, biologically or immunologically related).
  - 4. Use according to any one of the preceding claims wherein said medicament is administered: (a) for the treatment or prophylaxis of said tissue injury; and/or (b) in an amount effective to inhibit fibrogenesis or stimulate tissue-specific regeneration of said injured or damaged tissue; and/or (c) to inhibit loss or reduction of function of said tissue; and/or (d) orally, parenterally or topically; and/or (e) dispersed in a liquid tissue adhesive; and/or (f) in an aerosol.
  - 5. Use according to claim 3 or 4 wherein said tissue injury includes:

- (a) ischaemic-repurfusion injury; or
- (b) hyperoxia injury.

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6. Use according to claim 5(a) wherein said ischaemic-repurfusion injury is:

(a) associated with cardiac arrest, pulmonary occlusion, arterial (eg renal artery) occlusion, coronary occlusion or occlusive stroke; or

- (b) associated with surgery or the reduction or interruption of blood flow to an organ in a clinical procedure (eg carotoid enterectomy, coronary artery bypass, a tissue grafting procedure, an organ transplant or fibronolytic therapy); or
- (c) associated with cerebral infarction, myocardial infarction, asphyxia or cardiopulmonary arrest.
- 7. Use according to claim 5(b) wherein the hyperoxia injury is associated with the treatment of:
  - (a) a prematurely newborn baby; or
  - (b) emphysema; or
  - (c) asphyxia.
- 8. Use according to any one of the preceding claims wherein the tissue is lung, cardiac, hepatic, neural, pancreatic, synovial, skin or renal tissue, for example wherein:
  - (a) the tissue is renal tissue and the mammal is afflicted with glomerular nephritis, atherosclerosis or diabetes, or
  - (b) the tissue is cardiac tissue and the mammal is afflicted with atherosclerosis or vascular disease, or
  - (c) the tissue is pancreatic tissue and the mammal is afflicted with diabetes, or
  - (d) the tissue is synovial tissue and the mammal is afflicted with arthritis,
  - (e) the tissue is skin tissue and the mammal is afflicted with dermatitis or psoriasis,
  - (f) the tissue is lung tissue and the mammal is afflicted with bronchitis, emphysema, idiopathic pulmonary fibrosis, asthma, asphyxia, or adult respiratory distress syndrome.
  - 9. Use according to claim 3 or 4 wherein the tissue injury includes:
    - (a) an immune-cell mediated inflammatory response; or
    - (b) an inflammatory disease (eg a chronic inflammatory disease); or
    - (c) an abnormal immune response; or
    - (d) edema or erythema.
  - 10. Use according to claim 9(a), 9(c) or 9(d) wherein the tissue injury includes:
    - (a) a generalized acute inflammatory response; or
    - (b) airway inflammation.
  - 11. Use according to claim 9(b) wherein the inflammatory disease includes:
    - (a) an autoimmune disease; or
    - (b) arthritis, psoriasis, dermatitis, inflammatory bowel disease or diabetes.
  - 12. Use according to claim 10 wherein:
    - (a) in claim 10(a) the acute inflammatory response is associated with asphyxia or adult respiratory distress syndrome; or
    - (b) in claim 10(b) the airway inflammation is associated with chronic bronchitis, emphysema, idiopathic pulmonary fibrosis or asthma.
- 55 13. Use according to claim 11 wherein:
  - (a) in claim 11(a) the autoimmune disease is a neurodegenerative disease (eg multiple sclerosis or amyotrophic lateral scl rosis); or

- (b) in claim 11(b) the arthritis is rheumatoid, degenerative or psoriatic arthritis.
- 14. Use according to any one of claims 3-13 wherein the modulation of the inflammatory response is effected by administration of the medicament before or after the injury, for example prior to or after the reduction or interruption of blood flow or after resumption of blood flow when the injury is ischaemic-repurfusion injury.
- 15. Use according to claim 6(b) wherein said clinical procedure is a tissue grafting procedure (eg of skin, bone marrow or gastrointestinal mucosa tissue) or an organ transplant procedure (eg of lung, heart, kidney, liver or pancreas).
- 16. Use according to claim 15 wherein the modulation of the inflammatory response is effected by administration of the medicament:
  - (a) upon or following removal of the organ or tissue from a donor host; or
  - (b) during storage or transportation of the organ or tissue prior to implantation into a recipient host; or
  - (c) upon or following implantation into a recipient host.

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- 17. Use according to any one of the preceding claims wherein said medicament comprises the morphogen dispersed in a physiologically acceptable aqueous carrier suitable for parenteral administration to a mammal.
- 20 18. Use according to any one of the preceding claims wherein the amino acid sequence of said polypeptides comprises a sequence that:
  - (a) shares at least 80% homology with the sequence of said seven cysteine domain of human OP-1; or
  - (b) shares at least 60% amino acid identity, eg at least 65% identity, with the sequence of said seven cysteine domain of human OP-1; or
  - (c) comprises the sequence of the seven cysteine domain of human OP-1, mouse OP-1, human OP-2, mouse OP-2 or 60A, or naturally occurring or biosynthetic variant of any thereof, provided that any said variant induces tissue specific morphogenesis in said mammal; or
  - (d) comprises an amino acid sequence selected from Seq. ID Nos 9, 10, 11, 12, 13, 14, 26, 27, 28 or 29 (CBMP2A(fx), CBMP2B(fx), DPP(fx), VgI(fx), Vgr-1(fx), GDF-1(fx), BMP3, BMP5, BMP6 or OPX) or a naturally occurring or biosynthetic variant of any thereof, provided that any said variant induces tissue-specific morphogenesis in said mammal, or
  - (e) comprises an amino acid sequence of residues 38-139 of Seq. ID Nos. 5, 6, 7 or 8 or residues 354-455 of Seq ID No. 24, or a naturally occurring or biosynthetic variant of any thereof, provided that any said variant induces tissue-specific morphogenesis in said mammal.
  - 19. A pharmaceutical composition for use in alleviating injury associated with exposure of mammalian tissue to toxic oxygen concentrations, comprising a morphogen dispersed in a physiologically acceptable aqueous carrier to a concentration effective for alleviating extravasation of immune effector cells, interstitial inflammation, edema, necrosis or fibrogenesis in mammalian tissue at risk of, or afflicted with, said injury, said morphogen comprising a dimeric protein that induces tissue-specific morphogenesis in a mammal, said dimeric protein comprising a pair of folded polypeptides, the amino acid sequence of each of which comprises a sequence sharing at least 70% amino acid sequence homology with the C-terminal seven cysteine domain of human OP-1 (residues 38-139 of Seq. ID No. 5), said composition further comprising a free oxygen radical inhibiting agent or an anticoagulant.
  - 20. A pharmaceutical composition for topical administration to mammalian epithelial tissue, comprising a morphogen dispersed in a dermatologically acceptable carrier or in a biocompatible, non-irritating tissue surface adhesive (eg hydroxypropylcellulose) to a concentration effective for alleviating extravasation of immune effector cells, interstitial inflammation, edema, necrosis or fibrogenesis in mammalian tissue at risk of, or afflicted with, said injury, said morphogen comprising a dimeric protein that induces tissue-specific morphogenesis in a mammal, said dimeric protein comprising a pair of folded polypeptides, the amino acid sequence of each of which comprises a sequence sharing at least 70% amino acid sequence homology with the C-terminal seven cysteine domain of human OP-1 (residues 38-139 of Seq ID No. 5).
- 21. A preservation solution for maintaining <u>ex vivo</u> viability of mammalian cells or tissue or a mammalian organ, comprising a fluid formulation having an osmotic pressure substantially equivalent to the osmotic pressure of living mammalian cells and a morphogen dispersed in said fluid to a concentration effective for alleviating extravasation of immune effector cells, interstitital inflammation, edema, necrosis or fibrogenesis in said cells, tissue r organ,

said morphogen comprising a dimeric protein that induces tissue-specific morphogenesis in a mammal, said dimeric protein comprising a pair of folded polypeptides, the amino acid sequence of each of which comprises a sequence sharing at least 70% amino acid sequence homology with the C-terminal seven cysteine domain of human OP-1 (residues 38-139 of Seq. ID No. 5).

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- 22. A solution according to claim 21, further comprising a sugar, an anticoagulant or a free oxygen radical inhibiting agent; or, further formulated to maintain substantially normal ATP levels in said cells, tissue or organ.
- 23. The composition of claim 19 or 20 or the solution of claim 21 or 22 wherein the morphogen is as defined in claim 18.

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- 24. An <u>ex vivo</u> method for protecting a living mammalian tissue or transplanted mammalian organ from injury associated with the inflammatory response of activated immune effector cells comprising the step of providing to said tissue or organ a morphogen comprising a dimeric protein that induces tissue-specific morphogenesis in a mammal, said dimeric protein comprising a pair of folded polypeptides, the amino acid sequence of each of which comprises a sequence sharing at least 70% amino acid sequence homology with the C-terminal seven cysteine domain of human OP-1 (residues 38-139 of Seq. ID No. 5).
- 25. The method of claim 24 wherein:
  - (a) the tissue or organ is as defined in claim 15; and/or
  - (b) the morphogen is as defined in claim 18;
  - (c) the morphogen is provided in the form of a solution as defined in claim 21 or 22.

#### Patentansprüche

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- Verwendung eines Morphogens, das ein dimeres Protein umfaßt, das bei einem Säugetier (beispielsweise einem Menschen) eine gewebsspezifische Morphogenese induziert und zwei gefaltete Polypeptide umfaßt, wobei die Aminosäure-Sequenz von jedem eine Sequenz umfaßt, die zumindest 70% Aminosäure-Sequenz-Homologie mit der C-terminalen Sieben-Cystein-Domäne von menschlichem OP-1 teilt (Reste 38-139 von Seq. ID Nr. 5), zur Herstellung eines Medikamentes zur:
  - (a) Modulierung einer Entzündungsreaktion; oder
  - (b) Verminderung der Gewebs-zerstörenden Wirkungen, die mit der Entzündungsreaktion auf eine Gewebsschädigung verbunden sind; oder
  - (c) Steigerung der Lebensfähigkeit von verletztem oder geschädigtem Säugetiergewebe (beispielsweise Gewebe, das sich in vivo in einem Säugetier befindet).
- 40 2. Verwendung nach Anspruch 1 zur Modulierung einer Entzündungsreaktion in Säugetiergewebe, wobei die Modulation der Entzündungereaktion folgendes umfaßt: `
  - (a) Verminderung einer Fibrose oder Narbengewebsbildung; und/oder
- 45 (b) Hemmung der Anhaftung von Immuneffektorzellen an vaskuläres Endothel; und/oder
  - (c) Verminderung einer interstitiellen Entzündung; und/oder
  - (d) Verminderung eines Ödems oder Erythems; und/oder

- (e) Verminderung einer entzündlichen Gewebsnekrose.
- Verwendung nach Anspruch 1 oder Anspruch 2, bei der die Entzündungsreaktion mit einer Gewebsschädigung verbunden ist (wobei die Verletzung beispielsweise chemisch, mechanisch, biologisch oder immunologisch verursacht ist).
  - 4. Verwendung nach einem der vorhergehenden Ansprüche, bei der das Medikament:

(a) zur Behandlung oder Prophylaxe der Gewebsschädigung; und/oder (b) in einer Menge, die zur Hemmung einer Fibrogenese oder zur Stimulierung einer gewebsspezifischen Regeneration des verletzten oder geschädigten Gewebes wirksam ist; und/oder 5 (c) zur Hemmung eines Verlustes oder einer Verminderung der Funktion des Gewebes; und/oder (d) oral, parenteral oder topisch; und/oder (e) in einem flüssigen Gewebsklebstoff dispergiert; und/oder 10 (f) in einem Aerosol verabreicht wird. 5. Verwendung nach Anspruch 3 oder Anspruch 4, bei der die Gewebsschädigung: (a) eine ischämische Reperfusions-Schädigung; oder (b) Hyperoxie-Schädigung einschließt. 20 Verwendung gemäß Anspruch 5 (a), bei der die ischämische Reperfusions- Schädigung: (a) mit Herzstillstand, Lungenarterienverschluß, Arterienverschluß (beispielsweise Nierenarterienverschluß). Koronararterienverschluß oder durch Okklusion verursachten Schlag verbunden ist; oder 25 (b) mit einem chirurgischen Eingriff oder der Verminderung oder Unterbrechung des Blutstromes zu einem Organ bei einem klinischen Verfahren (beispielsweise einer Carotis-Enterektomie, aorto-koronarem Bypass, einem Gewebstransplantationsverfahren, einer Organtransplantations- oder fibronolytische Therapie) verbunden ist; oder 30 (c) mit einem Gehirninfarkt, Herzinfarkt, mit Asphyxie oder Herz-/Lungenstillstand verbunden ist. 7. Verwendung nach Anspruch 5 (b), bei der die Hyperoxie-Schädigung mit der Behandlung: 35 (a) eines frühgeborenen Säugling; oder (b) Emphysems; oder (c) Asphyxie 40 verbunden ist. 8. Verwendung nach einem der vorhergehenden Ansprüche, bei der das Gewebe Lungen-, Herz-, Leber-, Nerven-, Pankreas-, Synovial-, Haut- oder Nierengewebe ist, bei dem beispielsweise: 45 (a) das Gewebe Nierengewebe ist und das Säugetier an glomerulärer Nephritis, Arteriosklerose oder Diabetes leidet, oder (b) das Gewebe Herzgewebe ist und das Säugetier an Arteriosklerose oder einer Gefäßerkrankung leidet, 50 oder (c) das Gewebe Pankreasgewebe ist und das Säugetier an Diabetes leidet, oder (d) das Gewebe Synovialgewebe ist und das Säugetier an Arthritis leidet, 55 (e) das Gewebe Hautgewebe ist und das Säugetier an Dermatitis oder Psoriasis leidet, (f) das Gewebe Lungengewebe ist und das Säugetier an Bronchitis, Emphysem, ideopathischer Lungenfi-

brose, Asthma, Asphyxie oder Schocklunge leidet.

- 9. Verwendung nach Anspruch 3 oder Anspruch 4, bei der die Gewebsverletzung:
- (a) eine Immunzell-vermittelte Entzündungsreaktion; oder
  - (b) eine entzündliche Erkrankung (beispielsweise eine chronische entzündliche Erkrankung); oder
  - (c) eine abnormale Immunreaktion; oder
  - (d) ein Ödem oder Erythem einschließt.

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- 10. Verwendung nach Anspruch 9 (a), 9 (c) oder 9 (d), bei der die Gewebsschädigung:
  - (a) eine generalisierte akute entzündliche Reaktion; oder
  - (b) Atemwegsentzündung einschließt.
- 20 11. Verwendung nach Anspruch 9 (b), bei der die entzündliche Erkrankung:
  - (a) eine Autoimmunerkrankung; oder
- (b) Arthritis, Psoriasis, Dermatitis, eine entzündliche Darmerkrankung oder Diabetes einschließt.
  - 12. Verwendung nach Anspruch 10, bei der:
    - (a) in Anspruch 10 (a) die akute entzündliche Reaktion mit Asphyxie oder Schocklunge verbunden ist; oder
    - (b) in Anspruch 10 (b) die Atemwegsentzündung mit chronischer Bronchitis, Emphysem, ideopathischer Lungenfibrose oder Asthma verbunden ist.
  - 13. Verwendung nach Anspruch 11, bei der:
    - (a) in Anspruch 11 (a) die Autoimmunerkrankung eine neurodegenerative Erkrankung (beispielsweise Multiple Sklerose oder amyotrophe Lateralsklerose) ist; oder
    - (b) in Anspruch 11 (b) die Arthritis eine rheumatoide, degenerative oder psoriatische Arthritis ist.
- 40 14. Verwendung nach einem der Ansprüche 3 bis 13, bei der die Modulation der Entzündungsreaktion durch Verabreichung des Medikaments vor oder nach der Schädigung, beispielsweise vor oder nach der Verringerung oder Unterbrechung des Blutstromes oder nach Wiederaufnahme eines Blutstromes verabreicht wird, wenn die Schädigung eine ischämische Reperfusions-Schädigung ist.
- 45 15. Verwendung nach Anspruch 6 (b), bei der das klinische Verfahren ein Gewebs-Transplantations-Verfahren (beispielsweise von Haut-, Knochenmark- oder Gewebe der Gastrointestinalschleimhaut) oder ein Organtransplantations-Verfahren (beispielsweise von Lunge, Herz, Niere, Leber oder Pankreas) ist.
- **16.** Verwendung nach Anspruch 15, bei der die Modulation der Entzündungsreaktion durch Verabreichung des Medikamentes:
  - (a) bei oder im Anschluß an die Entfernung des Organs oder Gewebes von einem Spender; oder
- (b) während der Aufbewahrung oder des Transportes des Organs oder Gewebes vor Implantation in einen 55 Empfänger; oder
  - (c) bei oder im Anschluß an Implantation in einen Empfänger bewirkt wird.

- 17. Verwendung nach einem der vorhergehenden Ansprüche, bei der das Medikament das das Morphogen in einem physiologisch akzeptablen wässrigen Träger, der zur parenteralen Verabreichung an ein Säugetier geeignet ist, dispergiert umfaßt.
- 5 18. Verwendung nach einem der vorhergehenden Ansprüche, bei der die Aminosäure-Sequenz des Polypeptides eine Sequenz umfaßt, die:

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- (a) zumindest 80% Homologie mit der Sequenz der Sieben-Cystein-Domäne von menschlichem OP-1 teilt; oder
- (b) zumindest 60% Aminosäure-Identität, beispielsweise zumindest 65% Identität, mit der Sequenz der Sieben-Cystein-Domäne von menschlichem OP-1 teilt; oder
- (c) die Sequenz der Sieben-Cystein-Domäne von menschlichem OP-1, Maus OP-1, menschlichem OP-2, Maus OP-2 oder 60A oder deren natürlich vorkommende oder biosynthetische Varianten umfaßt, vorausgesetzt, daß irgendeine dieser Varianten eine gewebsspezifische Morphogenese bei dem Säugetier induziert; oder
- (d) eine Aminosäure-Sequenz umfaßt, die aus den Sequenz ID Nr. 9, 10, 11, 12, 13, 14, 26, 27, 28 oder 29 (CBMP2A (fx), CBMP2B(fx), DPP(fx), Vgl(fx), Vgr-1(fx), GDF-1(fx), BMP3, BMP5, BMP6 oder OPX) oder einer natürlich vorkommenden oder biosynthetischen Variante davon ausgewählt ist,vorausgesetzt, daß jede dieser Varianten eine gewebsspezifische Morphogenese bei dem Säugetier induziert, oder
- (e) eine Aminosäure-Sequenz der Reste 38-139 von Sequenz ID Nr. 5, 6, 7 oder 8 oder der Reste 354-455 von Sequenz ID Nr. 24 oder eine natürlich vorkommende oder biosynthetische Variante von irgendeiner davon umfaßt, vorausgesetzt, daß jede der Varianten eine gewebsspezifische Morphogenese bei dem Säugetier induziert.
- 19. Pharmazeutische Zusammensetzung zur Verwendung bei der Linderung einer Verletzung, die mit der Exposition von Säugetiergewebe gegenüber toxischen Sauerstoff-Konzentrationen verbunden ist, die ein Morphogen in einem physiologisch verträglichen wässrigen Träger in einer Konzentration dispergiert umfaßt, die zur Verminderung einer Extravasation von Immuneffektorzellen, einer interstitiellen Entzündung, eines Ödems, einer Nekrose oder einer Fibrogenese in Säugetiergewebe wirksam ist, das dem Risiko der Schädigung ausgesetzt ist oder darunter leidet, wobei das Morphogen ein dimeres Protein umfaßt, das eine gewebsspezifische Morphogenese bei einem Säugetier induziert, wobei das dimere Protein zwei gefaltete Polypeptide umfaßt, und wobei die Aminosäure-Sequenz jedes der beiden eine Sequenz umfaßt, die zumindest 70% Aminosäure-Sequenz-Homologie mit der C-terminalen Sieben-Cystein-Domäne von menschlichem OP-1 (Reste 38-139 von Seq. ID Nr. 5) umfaßt, wobei die Zusammensetzung weiterhin ein Mittel zur Hemmung freier Sauerstoff-Radikale oder ein Antikoagulanz umfaßt.
  - 20. Pharmazeutische Zusammensetzung zur topischen Verabreichung an Säugetier-Epitelgewebe, die ein in einem dermatologisch akzeptablen Träger oder in einem biokompatiblen, nicht reizenden Gewebsoberflächenklebstoff (z.B. Hydroxypropyl-zellulose) in einer Konzentration dispergiert umfaßt, die zur Verminderung der Extravasation von Immuneffektorzellen, einer interstitiellen Entzündung, eines Ödems, einer Nekrose oder Fibrogenese bei Säugetiergewebe wirksam ist, das dem Risiko Schädigung ausgesetzt ist oder darunter leidet, wobei das Morphogen ein dimeres Protein umfaßt, das eine gewebsspezifische Morphogenese bei einem Säugetier induziert, wobei das dimere Protein zwei gefaltete Polypeptide umfaßt, und wobei die Aminosäure-Sequenz jedes der beiden eine Sequenz umfaßt, die zumindest 70% Aminosäure-Sequenz-Homologie mit der C-terminalen Sieben-Cystein-Domäne von menschlichem OP-1 (Reste 38-139 von Seq. ID Nr. 5) teilt.
  - 21. Eine Konservierungslösung zur Aufrechterhaltung der ex vivo -Lebensfähigkeit von Säugetierzellen oder -gewebe oder eines Säugetierzellen, das eine flüssige Zubereitung umfaßt, die einen im wesentlichen dem osmotischen Druck lebender Säugetierzellen äquivalenten Druck und ein in der Flüssigkeit in einer Konzentration dispergiertes Morphogen aufweist, die zur Verminderung der Extravasation von Immuneffektorzellen, einer interstitiellen Entzündung, eines Ödems, einer Nekrose oder Fibrogenese bei diesen Zellen, Gewebe oder Organ wirksam ist, wobei das Morphogen ein dimeres Protein umfaßt, das eine gewebsspezifische Morphogenese bei einem Säugetier induziert, wobei das dimere Protein zwei gefaltete Polypeptide umfaßt, und wobei die Aminosäure-Sequenz von jedem eine Sequenz umfaßt, die zumindest 70% Aminosäur -Sequenz-Homologie mit der C-terminalen Sieben-

Cystein-Domäne von menschlichem OP-1 (Reste 38-139 von Seq. ID Nr. 5) teilt.

- 22. Lösung nach Anspruch 21, die weiterhin einen Zucker, ein Antikoagulanz oder ein Mittel zur Hemmung freier Sauerstoff-Radikale umfaßt; oder weiterhin zur Aufrechterhaltung von im wesentlichen normalen ATP-Spiegeln in diesen Zellen, Gewebe oder Organ formuliert ist.
- Zusammensetzung nach Anspruch 19 oder Anspruch 20 oder die Lösung nach Anspruch 21 oder 22, bei der das Morphogen wie in Anspruch 18 definiert ist.
- 24. Ex-vivo-Verfahren zum Schutz eines lebenden Säugetiergewebes oder transplantierten Säugetierorganes vor einer Schädigung, die mit der Entzündungsreaktion von aktivierten Immuneffektorzellen verbunden ist, das den Schritt umfaßt, dem Gewebe oder Organ ein Morphogen zu verabreichen, das ein dimeres Protein umfaßt, das eine gewebsspezifische Morphogenese bei einem Säugetier induziert, wobei das dimere Protein zwei gefaltete Polypeptide umfaßt, und wobei die Aminosäure-Sequenz von jedem eine Sequenz umfaßt, die zumindest 70% Aminosäure- Sequenz-Homologie mit der C-terminalen Sieben-Cystein-Domäne von menschlichem OP-1 (Reste 38-139 von Seq. ID Nr. 5) teilt.
  - 25. Verfahren nach Anspruch 24, bei dem:
    - (a) das Gewebe oder Organ wie in Anspruch 15 definiert ist; und/oder
    - (b) das Morphogen wie in Anspruch 18 definiert ist; und/oder
    - (c) das Morphogen in der Form einer Lösung wie in Anspruch 21 oder 22 definiert verabreicht wird.

#### Revendications

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- 1. Utilisation d'un morphogène comprenant une protéine dimérique qui induit la morphogenèse tissu-spécifique chez un mammifère (par exemple un humain) et comprend une paire de polypeptides repliés, la séquence des acides aminés de chacun de ceux-ci comprend une séquence partageant au moins 70% d'homologie de séquence des acides aminés avec le domaine à sept cystéines du C-terminal de l'OP-1 humaine (résidus 38-139 de la séquence ID No.5), pour la fabrication d'un médicament pour :
  - (a) moduler une réponse inflammatoire; ou
  - (b) ralentir les effets de détérioration tissulaire associés à la réponse inflammatoire provoquée par une lésion tissulaire; ou
  - (c) accroître la viabilité des tissus lésés ou endommagés de mammifère (par exemple un tissu placé in vivo dans un mammifère).
- 2. Utilisation selon la revendication 1 pour moduler une réponse inflammatoire dans un tissu de mammifère, dans laquelle la modulation de cette réponse inflammatoire comprend:
  - (a) Le ralentissement de la formation des tissus fibrosés ou cicatriciels; et/ou
  - (b) l'inhibition de l'adhérence des cellules effectrices immunes sur l'endothélium vasculaire; et/ou
  - (c) le ralentissement d'une inflammation interstitielle; et/ou
  - (d) le ralentissement d'un oedème ou érythème; et/ou
  - (e) le ralentissement d'une nécrose des tissus inflammatoires.
- Utilisation selon la revendication 1 ou la revendication 2 d'après laquelle la réponse inflammatoire est associée à une lésion tissulaire (la lésion étant par exemple liée à des causes chimiques, mécaniques, biologiques ou immunologiques).
- 4. Utilisation selon l'une quelconque des revendications précédentes dans laquelle ledit médicament est administré : (a) pour le traitement ou la prophylaxie de ladite lésion tissulaire; et/ou (b) en une quantité efficace pour inhiber la fibrogénèse ou stimuler la régénération tissu-spécifique de ce tissu lésé ou endommagé; et/ou (c) pour inhiber la perte ou la diminution de la fonction dudit tissu ;et/ou (d) par voie orale, parentérale ou topique; et/ou (e) dispersé

dans un adhésif liquide tissulair ; et/ou (f) dans un aérosol.

- 5. Utilisation selon la revendication 3 ou 4 dans laquelle la dite lésion tissulaire comporte:
  - (a) une lésion ischémique par reperfusion; ou
  - (b) une lésion par hyperoxie.

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- 6. Utilisation selon la revendication 5(a) dans laquelle la dite lésion ischémique par reperfusion est:
  - (a) associée à un arrêt cardiaque, une occlusion pulmonaire, une occlusion artérielle (par exemple d'une artère rénale), une occlusion d'une artère coronaire ou une attaque à caractère occlusif; ou
    - (b) associée à la chirurgie ou à la diminution ou à l'interruption de la circulation du sang vers un organe dans un traitement clinique (par exemple entérectomie de la carotoïde, un pontage d'une artère coronaire, un procédé de greffage d'un tissu, une transplantation d'organe ou une thérapie fibrinolytique); ou
    - (c) associée à un infarctus cérébral, un infarctus du myocarde, une asphyxie ou un arrêt cardio-pulmonaire.
- 7. Utilisation selon la revendication 5(b) dans laquelle la lésion à caractère hyperoxie est associée au traitement :
  - (a) d'un nouveau-né prématuré; ou
  - (b) d'un emphysème; ou
  - (c) d'une asphyxie.
- 8. Utilisation selon l'une quelconque des revendications précédentes d'après laquelle le tissu est un tissu pulmonaire, cardiaque, hépatique, neural, pancréatique, synovial, de la peau ou rénal, par exemple dans lequel:
  - (a) le tissu est un tissu rénal et le mammifère souffre d'une néphrite glomérulaire, d'athérosclérose ou d'un diabète, ou
  - (b) le tissu est un tissu cardiaque et le mammifère souffre d'une athérosclérose ou d'une maladie vasculaire, ou
  - (c) le tissu est un tissu pancréatique et le mammifère souffre du diabète, ou
    - (d) le tissu est un tissu synovial et le mammifère souffre d'arthrite,
  - (e) le tissu est un tissu de la peau et le mammifère souffre d'une dermatite ou d'un psoriasis,
  - (f) le tissu est un tissu du poumon et le mammifère souffre d'une bronchite, d'emphysème, de fibrose pulmonaire protopathique, d'asthme, d'asphyxie, ou du syndrome d'une douleur respiratoire de l'adulte.
- 9. Utilisation selon la revendication 3 ou 4 dans laquelle la lésion tissulaire comporte :
  - (a) une réponse inflammatoire à médiation de cellules immunitaires;
  - (b) une maladie inflammatoire ( par exemple une maladie inflammatoire chronique); ou
  - (c) une réponse immunitaire anormale; ou
  - (d) un oedème ou un érythème.
- 10. Utilisation selon la revendication 9(a), 9(c), ou 9(d) dans laquelle la lésion tissulaire comporte:
  - (a) une réponse inflammatoire aigue généralisée; ou
  - (b) une inflammation des voies aériennes.
- 11. Utilisation selon la revendication 9(b) d'après laquelle la maladie inflammatoire comporte :
  - (a) une maladie auto-immune; ou
  - (b) l'arthrite, un psoriasis, une dermatite, une maladie d'inflammation des intestins ou un diabète.
- 12. Utilisation selon la revendication 10 dans laquelle :
  - (a) dans la revendication 10(a) la réponse inflammatoire aiguë est associée à une asphyxie ou à un syndrome d'une douleur respiratoire de l'adulte; ou
    - (b) dans la revendication 10(b) l'inflammation de la voie aérienne est associée à une bronchite chronique, un emphysème, une fibrose pulmonaire protopathique ou à de l'asthme.

13. Utilisation selon la revendication 11 dans laquelle:

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- (a) dans la revendication 11(a) la maladie auto-immune est une maladie neuro-dégénérative (par exemple une sclérose multiple ou une sclérose latérale amyotrophique); ou
- (b) dans la revendication 11(b) l'arthrite est à caractère rhumatismal, dégénératif ou arthrite psoriasique.
- 14. Utilisation selon l'une quelconque des revendications 3-13 dans laquelle la modulation de la réponse inflammatoire est effectuée par l'administration d'un médicament avant ou après la lésion, par exemple avant ou après la réduction ou l'interruption de la circulation du sang ou après la reprise de la circulation du sang lorsque la lésion est une lésion ischémique par reperfusion.
- 15. Utilisation selon la revendication 6(b) dans laquelle la dite procédure clinique est un procédé de greffage d'un tissu (par exemple de peau, de moelle osseuse ou d'un tissu de la muqueuse gastro-intestinale) ou un procédé de transplantation d'un organe (par exemple d'un poumon, d'un coeur, d'un rein, d'un foie ou d'un pancréas).
- 16. Utilisation selon la revendication 15 d'après laquelle la modulation de la réponse inflammatoire est effectuée par l'administration du médicament:
  - (a) dès ou après l'élimination de l'organe ou du tissu provenant d'un hôte donneur; ou
  - (b) pendant la conservation ou le transport de l'organe ou du tissu avant l'implantation chez un hôte receveur; ou
  - (c) des ou après l'implantation chez l'hôte receveur.
- 17. Utilisation selon l'une quelconque des revendications précédentes d'après laquelle ledit médicament comprend le morphogène dispersé dans un véhicule aqueux approprié physiologiquement acceptable pour une administration par voie parentérale à un mammifère.
  - 18. Utilisation selon l'une quelconque des revendications précédentes dans laquelle la séquence des acides aminés desdits polypeptides comprend une séquence qui:
    - (a) partage au moins 80% d'homologie avec la séquence dudit domaine à sept cystéines de l'OP-1 humaine; ou
    - (b) partage au moins 60% d'identité des acides aminés, par exemple au moins 65 % d'identité, avec la séquence dudit domaine à sept cystéines de l'OP-1 humaine; ou
    - (c) comprend la séquence du domaine à sept cystéines de l'OP-1 humaine, OP-1 de souris, OP-2 humaine, OP-2 ou 60A de souris, ou une variante naturelle ou biosynthétique de chacun de ceux-ci, pourvu que chacune de ces variantes induise une morphogenèse tissu-spécifique chez ledit mammifère; ou
    - (d) comprend une séquence d'acides aminés choisie parmi la séquence ID Nos. 9, 10, 11, 12, 13, 14, 26, 27, 28 ou 29 (CBMP2A(fx), CBMP2B(fx), DPP(fx), Vgl(fx), Vgr-1(fx), GDF-1(fx), BMP3, BMP5, BMP6 ou OPX) ou une variante naturelle ou biosynthétique de chacune de celles-ci, pourvu qu'une quelconque variante induise une morphogenèse tissu-spécifique dans ledit mammifère; ou
    - (e) comprend une séquence des acides aminés des résidus 38-139 de la séquence ID No. 5, 6, 7 ou 8 ou les résidus 354-455 de la séquence ID No. 24, ou une variante naturelle ou biosynthétique de chacune de cellesci, pourvu qu'une quelconque de ces variantes induise une morphogenèse tissu-spécifique chez le dit mammifère.
  - 19. Une composition pharmaceutique pour l'utilisation dans le ralentissement des lésions associées à une exposition d'un tissu d'un mammifère à des concentrations toxiques d'oxygène, comprenant un morphogène dispersé dans un véhicule aqueux physiologiquement acceptable à une concentration efficace pour ralentir l'extravasation des cellules effectrices immunes, un inflammation interstitielle, un oedème, une nécrose ou fibrogenèses dans un tissu de mammifère à risque, ou ayant souffert de, cette lésion, ledit morphogène comprenant une protéine dimérique qui induit une morphogenèse tissu-spécifique chez un mammifère, cette protéine dimérique comprenant une paire de polypeptides repliés, la séquence des acides aminés de chacune de celles-ci comprend une séquence partageant au moins 70% d'homologie de la séquence des acides aminés avec le domaine à sept cystéines du C-terminal de l'OP-1 humaine (résidus 38-139 de la séquence ID No.5), la dite composition comprenant en outre un agent inhibant ou un anticoagulant à radical oxygène libre.
  - 20. Une composition pharmaceutique pour une administration topique à un tissu épithélial de mammifère, comprenant

un morphogène dispersé dans un véhicule dermatologiquement acceptable ou dans l'adhésif d'un surface d'un tissu biocompatible, non irritant ( par exemple l'hydroxypropylcellulose) à une concentration efficace pour ralentir l'extravasation des cellules effectrices immunes, d'une inflammation interstitielle, d'un oedème, d'une nécrose ou fibrogenèse dans un tissu de mammifère à risque de, ou ayant souffert de la dite lésion, ledit morphogène comprenant une protéine dimérique qui induit une morphogenèse tissu-spécifique chez un mammifère, ladite protéine dimérique comprenant une paire de polypeptides repliés, la séquence des acides aminés de chacune de celles-ci comprend une séquence partageant au moins 70% d'homologie de la séquence des acides aminés avec le domaine à sept cystéines du C-terminal de l'OP-1 humaine (résidus 38-139 de la séquence ID No.5).

- 21. Une solution de conservation pour maintenir la viabilité ex vivo de cellules ou d'un tissu d'un mammifère ou d'un organe d'un mammifère, comprenant une formulation liquide possédant une pression osmotique essentiellement équivalente à la pression osmotique des cellules vivantes de mammifère et un morphogène dispersé dans ce liquide à une concentration efficace pour ralentir l'extravasation des cellules effectrices immunes, une inflammation interstitielle, un oedème, une nécrose ou fibrogenèse dans ces cellules , tissu ou organe, ledit morphogène com-15 prenant une protéine dimérique qui induit une morphogenèse tissu-spécifique chez un mammifère, ladite protéine dimérique comprenant une paire de polypeptides repliés, la séquence des acides aminés de chacune de celles-ci comprend une séquence partageant au moins 70% d'homologie de la séquence des acides aminés avec le C-terminal du domaine à sept cystéine de l'OP-1 humaine (résidus 38-139 de la séquence ID No.5).
- 22. Une solution selon la revendication 21, comprenant en outre un sucre, un anticoagulant ou un agent inhibant à radical oxygène libre; ou, en outre formulé pour essentiellement maintenir les niveaux normaux d'ATP dans lesdites cellules, tissu ou organe.
- 23. Une composition selon la revendication 19 ou 20 ou la solution selon la revendication 21 ou 22 dans laquelle le 25 morphogène est tel que défini dans la revendication 18.
  - 24. Une méthode ex vivo pour protéger un tissu vivant de mammifère ou un organe transplanté de mammifère contre des lésions associées à une réponse inflammatoire de cellules effectrices immunes activées comprenant l'étape de fournir au dit tissus ou organe un morphogène comprenant une protéine dimérique qui induit une morphogenèse tissu-spécifique chez un mammifère, la dite protéine dimérique comprenant une paire de polypeptides repliés, la séquence des acides aminés de chacune de celle-ci comprend une séquence partageant au moins 70% d'homologie de la séquence des acides aminés avec le domaine à sept cystéines du C-terminal de l'OP-1 humaine (résidus 38-139 de la séquence ID No.5).
- 25. La méthode selon la revendication 24 dans laquelle :
  - (a) le tissu ou organe est tel que défini dans la revendication 15; et/ou
  - (b) le morphogène est tel que défini dans la revendication 18;
  - (c) le morphogène est fourni sous forme d'une solution telle que définie dans la revendication 21 ou 22.

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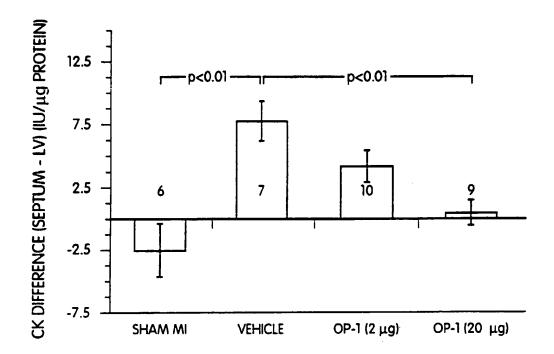


Fig. 1

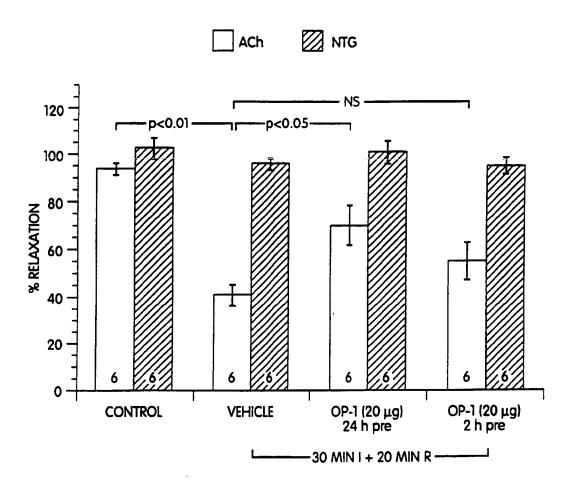


Fig 2

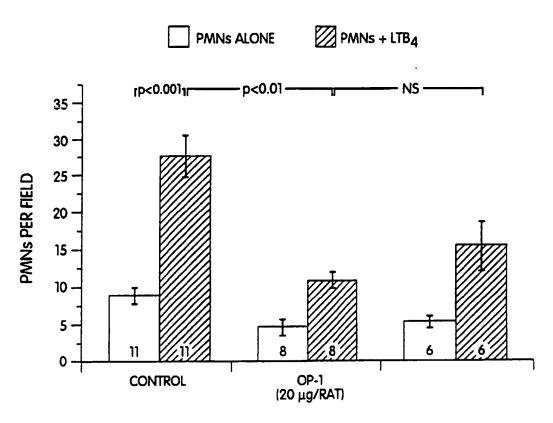


Fig. 3

